













# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL XXIV.]

JANUARY 1915.

[ No. 1.

---

## NEW YEAR.

With the present number the Indian Homeopathic Review launches on the twenty fourth year of its existence. It is our honoured privilege to extend our hearty good wishes to all our subscribers and colleagues here as well as in Europe and America. The continental war has more or less affected all business in one way or another everywhere. With the continued success of the British and the Allies, it is hoped the war will come to a speedy close. In Calcutta business is again resuming its former shape and we hope to be able to print our journals more regularly. The Calcutta Homeopathic Hospital has done a lot of good work, as the annual report which we hope to publish next month will show. The Calcutta School of Homeopathy has moved into new quarters adjoining the Hospital and it is hoped the students will derive much clinical facilities thereby. On the whole it may con-

fidently be said that there has been a marked progress in the cause of Homeopathy in India. From Calcutta, it has now spread far and wide and homeopathic practitioners are found all over India.

Once more extending hearty greetings we begin our work for the new year.

J. N. M.

### WHITHER ARE WE DRIFTING ?

In the days gone by when we were in college there were two classes of homeopaths, one believing in nothing but crude drugs in material doses and when opportunity arose (according to their theory), not to hesitate giving Quinine, Mercury and the like stuffs in massive doses, while the other believed in the higher potencies only and gave nothing but the most highly attenuated doses. The result was that the one accused the other of practising allopathy while the other accused the high potency men saying that their potencies were nothing but myths. Happily this state of things is very much altered today.

The blame was often laid at the door of the homeopath that he did not care to diagnose the disease, often disregarding the gravity of the situation and only looking for the peculiar and uncommon symptoms to the total disregard of the others. There is much to be said for and against this. While it is undoubtedly true that to be good prescribers we have to look at the peculiar and uncommon symptoms carefully, for they often

lead to the selection of the remedy, we should remember that Hahnemann's teaching was that the totality of the symptoms, that naturally means the symptoms that are important from the pathological point of view as also those that are important from the prescriber's point of view should be taken into consideration. When we have a given case before us, it is at first essential to see how the patient is from the diagnostic point of view, for a physician is called not only to prescribe a medicine, he has various other functions. He has to tell the patient's people the exact condition of the patient, his chances of recovery, whether it is a case for the physician, or for the surgeon and then finally comes the question of prescribing. When the question for the selection of the remedy comes, then we must take into consideration all his symptoms particularly the peculiar and uncommon ones. In the cure of a case from the physician's point of view it is all important that he should be able to select the right remedy otherwise no cure will be effected. This inability or failure to select the similimum has compelled many a man to go astray and find a resting place in the chaotic confusion of the pathologist or the dominant school, who are always hunting but are yet to find a *royal road to cure*, for they will not recognize the right road because it is a difficult one. While the total disregard or ignorance of pathology again has given rise to much trouble particularly in our country. It was a very unfortunate circumstance for India that one of the pioneers of Homeopathy was a layman, who learnt

the art of prescribing very well and thus did yeoman's service particularly to the poor. But this gave rise to the impression that homeopathy is an art of prescribing that can be picked up by any body and thus within a short time the country was flooded with these lay practitioners. While they did much good in giving relief to a lot of the suffering people, they also did a great deal of harm for it brought down the homeopath in the eye of the public and these lay doctors (?) did a lot of harm by not being able to diagnose difficult and incurable cases for they were unable to understand the gravity of the situation and there was no medical law preventing people from practising.

Now it is much to be regretted that we find similar things prevailing in Europe and America. We read an article in one of the well-known American journals and are charmed with the admirable way the writer handles his subject. The diagnosis, pathology &c are dealt with in a masterly way but when we come to treatment we find that he sums up in a few lines all he has to say while he took many pages in writing about the other subjects. What is the result? The treatment is a failure. Elsewhere we shall quote such an article.

This same paper accuses Dr Tyler of London for curing a case of chronic stomach disorder in fifteen months with four doses of Arsenic 200 only because she did not attempt at a diagnosis. But the other doctors ought to remember that she cured her case while they failed to do so. J. N. MAJUMDAR, M. D.

## ABORTIONS.

BY W. E. REILY, M. D., FULTON, MO.

Of all the troubles of the general medical man there are none which can compare with abortions in possibilities of damage to his reputation, both professionally and morally.

Judging from the number of criminal malpractice suits which have been originated and prosecuted by the advice and consent and at the connivance and instigation of his satanic majesty and the American Medical Association, we must conclude the traditional temptress of the Garden of Eden would at least try the modern doctor with her tale of woe and an appeal to his twentieth century chivalry rather than the apple of knowledge.

Scientifically and ethically, abortion is defined as the expulsion of the product of conception, either living or dead, during the first six months of pregnancy, or before the period of viability.

Maternity hospital statistics give the percentage of abortions as about twenty-five, but we who have had any considerable experience in general practice know that in this late day when, in spite of Rooseveltian preachments to the contrary, race suicide is winked at even in suffrage clubs and temperance societies, the percentage of abortions to all pregnancies will reach considerably higher than fifty per cent.

The symptoms of abortion vary from a slight exaggeration of the normal menstrual symptoms during

the first month, through all degrees, to the regular symptoms of term delivery after the beginning of the third month.

These symptoms are too familiar to require more than a passing notice in this paper.

The most frequent complication of abortions is the retention of the secundines. This may occur in any one of three forms. The membranes may be entirely separated from the uterus and remain within it, or they may be entirely adherent to the uterine walls, or they may be partially separated and still retained. The first of these conditions offers the greatest danger from infection, and the last offers the greatest danger from hæmorrhage and general septicæmia.

Next to retention of membranes is the danger of hæmorrhage. This may occur during the detachment of the ovum itself or during the detachment of the placenta or membranes, and is frequently the leading symptom of partial retention of membranes.

I have seen a woman bleed to syncope at the end of the first month, and when she did not suspect that she was pregnant until she passed the fœtus.

Septicæmia may follow any abnormal interruption of pregnancy, especially if there is retention of any of the membranes or excessive hæmorrhages. It is always accompanied by a rise in the temperature and frequently with a chill.

Of the causes of abortion those affecting the fœtus through paternity are advanced age, lowered vitality due to overwork or excesses, especially venereal ;

syphilis, tuberculosis, and such influences as lead to poisoning and alcoholism.

The maternal causes may include all those affecting the father and with more certainty if both parents are affected by them.

Bad hygienic surroundings, insufficient food and certain occupations as well as uterine displacements, tumors or lacerations of the cervix frequently act unfavorably upon the mother.

Of the diseases which have a tendency to interrupt pregnancy we have : Typhoid fever, in which there occurs about 66 per cent. of abortions : more in the early months of pregnancy. Pneumonia with an average of 33 per cent. in the early months, and as high as 75 per cent. in the later months. The same conditions assume in measles.

Small-pox seems to manifest a preference for pregnant women, especially in the earlier months, but is more dangerous when occurring in the later months, during which time the more severe invasions are almost sure to produce abortion.

Malaria produces abortion in about one-half of the cases, and syphilis in a still larger proportion.

Severe traumatism and sometimes shock will produce abortion under favorable conditions.

With regard to the prognosis, we have only to consider the mother, as the foetus always dies. In cases of spontaneous abortion, under proper care, the mother almost always recovers. The cause of abortion, the stage of the pregnancy and the degree of



cleanliness and care observed by the patient, all influence the final issue of the case.

With proper care as to the complete removal of all the products of conception under strict antisepsis and with rest in bed for a period of ten days, the mortality will fall well under two per cent.

The diagnosis of abortion is usually easy. We have usually the history of entire absence or delay of the menstrual function, pain which is more or less intermittent in character, hæmorrhage, dilatation of the cervix and descent of the ovum.

Abortion may be differentiated from dysmenorrhœa by the fact that the hæmorrhage in the former condition almost always precedes the pain, while in the latter it follows it. In dysmenorrhœa the cervix is hard and closed, while in abortion the cervix is soft and more or less dilated.

In the case of threatened abortion the first point to be ascertained is whether the abortion is inevitable.

Abortion is inevitable when the membranes are ruptured, when the foetus is dead or when any part of the foetus is already engaged in the cervix. So long as none of these symptoms are present abortion may not occur. In the case of hæmorrhage during the early weeks of pregnancy it may be difficult to ascertain whether abortion has really taken place or not, and, if so, whether it has been complete. If the symptoms are serious enough it may become necessary to explore the uterine cavity, but this should be done with extreme caution. I have seen quite considerable

hæmorrhage with pains and all the attendant symptoms of abortion pass away under treatment and the child born alive at term.

For the prevention of threatened abortion I have found no remedy to compare with Gelsemium tincture. Next to this we have Viburnum, Sabina, Chamomilla, Secale and a long list of others. Absolute rest in bed and the intelligent selection of a homeopathic remedy will do much along the line of prevention.

When the abortion becomes inevitable we should proceed according to modern obstetrical methods, and under strict antiseptic precautions be sure that we clear the uterine cavity of all tissues and membranes. I use a solution of pix cresol in all obstetrical operations, and have not had a case of puerperal sepsis in my own patients during eighteen years. ( Missouri Institute. )

—*Medical Century.*

---

## • ON A CASE OF INDURATED ABSCESS.

A young man aged about 26, thinly built, tall, formerly of good physique, had been suffering from indurated abscesses one in the epigastric region and the other in the axilla extending over a portion of the scapula. After a month's suffering the former was opened. The patient came under my treatment for the latter on November 7th. 1914. External remedies had been tried before but without success. Moreover the abscess was one of stony hardness. The patient's

eyes were sunken, body much emaciated and he always felt uneasy. I prescribed Carbo Animalis 30 twice daily for 3 days. On the 4th. day I was called in and the report was that he felt slightly feverish, the abscess appeared a little soft. I stopped the remedy and after 2 days saw the patient and found no improvement. I next prescribed Merc. Sol. 200 one dose. After a week I found marked improvement and the abscess considerably diminished and much softened. Prescribed Placebo for 10 days and repeated another dose of Merc. Sol. The patient got quite well within a month.

SURENDRA NATH GUPTA, M. B. (Homeo.).  
 Patuakhali. Dt. Barisal.

---

## VERIFICATIONS.

### 5. *Plumbum met in Dysentery.*

A young Mahomedan woman, robust constitution had been down with Dysentery for one month and after trying other systems of treatment came under me on the 13th. April 1913. The following symptoms were noticed.

Stools almost every two to three hours. Great pain in abdomen especially about the navel, cutting pain causing her to scream. Stools almost pure blood, or dark bloody and profuse, sometimes fruitless attempts to pass stools, considerable thirst.

Occasionally she passed involuntary stools.

Constant nausea and vomiting of bile.

Abdominal muscles were contracted.

Pulling sensation in the umbilicus.

She was constipated before this attack.

Slight feverishness in the afternoon.

No inclination to take food.

Bad taste in the mouth.

I gave her Plumbum met 30 after every third stools, which gave her some relief.

Placebo followed the next day.

No further improvement, stools consisted only of dark thin blood and a few mucus shreds. Plumbum 200 one dose cured her.

## 1 II. *Typhoid Fever.*

- A young girl of three years of age came under my treatment for typhoid fever on the 29th January 1914. She had the fever for the last seven days and under another homeopathic physician of the locality during this period.

Case went on worse and worse when I was called in consultation. When I came I found the following conditions of the patient.—Fever very high, temperature ranging between 102 and 104. F.

- Aggravation, generally in the afternoon from three to six P. M. In the morning when the temperature came down she was semiconscious but in the afternoon when temperature went high she was completely comatose, no response to questions or signs of consciousness considerable cough and very loose rattling sound was heard even from a distance.

Abdomen very much distended, had constipation

before but now diarrhœa of thin, yellow, watery and fetid stools. Tongue coated dirty white.

Incoherent, delirious talks almost day and night, jerking of extremities now and then.

Mucous rales audible in both sides of the lungs.

Urine scanty and high colored, passed unconsciously in the bed. Several medicines were given before.

Antim tart 30 twice daily.

31st, I got the report that the patient was better. No medicine.

2nd February.—Patient's condition was worse, I saw the case, starting of limbs almost in a state of convulsion. Tympanitic distention was great and diarrhœa more frequent, fever almost the same.

Cicuta vir. 30 and later on 200 stopped the convulsions and reduced the distention of abdomen and diarrhœa.

3rd, reported better, no medicine.

5th, Fever is as high as before. Rattling sound all over the chest. Diarrhœa almost gone.

Ferrum Phos 30 three doses that day.

No report came in the next day. But two days after I learned that the child was improving and the same medicine was continued. I advised the attending physician to stop the medicine which was done.

In short the patient was completely cured after a fortnight. I used to get the report occasionally.

III. *Laryngitis and hoarseness. Hepar, Manganum*

I was called to see a Marwari young man of broken

down constitution and syphilitic history for fever, cough and laryngeal inflammation. He was under allopathic treatment for a long time without any benefit.

Thickness of mucus membranes of the air passages. Fever, not very high, generally in the evening continued throughout the night. Morning remission with copious perspiration, cough aggravated during fever. Had syphilis three years ago and treated by allopathic applications of various kinds. Voice, indistinct and almost inaudible. Tubercular laryngitis was the diagnosis of the old school physicians and no hope of recovery was the prognosis.

I commenced treatment with Hepar sulph 30 and 200 which had the effect of mitigating cough and reducing the fever, in fact the fever was cured.

Though these conditions are changed the patient became weak and emaciated, very anaemic looking, could not take his food well.

Hoarseness worse in the morning and better by hawking up much thick mucus. Dryness of the throat and roughness of the larynx which was painful on pressure. Cough was better at night and was relieved by lying down,

Arsenic Iod 30 three times a day, had no effect.

Manganum 200 one dose had marvellous effect. The patient was improved in every respect.

Placebo continued for a week and further improvement stopped.

Another dose of Manganum 200 had the desired effect. Improvement was maintained. Placebo followed.

In this way the patient gradually recovered from his illness, but it took a long time to gain strength and flesh. Anaemia was very much reduced by the medicine alone as he could not take his nourishment for a long time. Milk and fruit juices were given with great difficulty as he could not take any solid food for months. ‘

This was a very important case.

#### IV. *Tellurium-Otorrhœa.*

I have derived much benefit from this medicine in various stages of otitis media, going on to the stage of suppuration and destruction of the membrana tympani. The following cases in point. An elderly gentleman of very robust frame of body came under my treatment for otorrhœa. He suffered long from pains in the ear and running of watery pus from the ear. He was under allopathic treatment for a long time without much effect.

Fair color and plethoric.

Pain throbbing and stitching first in the right and subsequently in the left ear.

Medicated syringe had no effect.

Buzzing and humming sound in the ear.

Deafness later on. More in the left.

Left membrane was destroyed, right one partially. Pus thick, yellowish white with fish-brine odor.

Discharge more in the day time, not much at night, spirits dejected, always morose. No hope of recovery.

Merc sol, Pulsat, Hepar sulph and some other medicine were tried, not much effect.

Tellurium at first sixth centesimal and subsequently a dose or two of the cm potency effected a cure.

V. *The Same.*

A young boy of twelve years of age suffered from birth with pain in the ears and running from them. He was treated in various ways without result.

Boy haggard and sallow complexion, thin and rather anaemic, glands in the neck swollen and hard.

Subject to cold and cough.

Father died rather young from erysipelas of face. No history of tuberculosis in the family. Right ear was completely deaf and left one partially so.

Pus thick, yellow, of a fish-brine odor, not very copious.

Hepar sulph did a good deal of good in respect of the otorrhea. General health was somewhat improved.

But deafness was not in any way improved. I tried various medicines.

This was a pure psoric case and Psorinum has done much.

The odour of pus became changed but no improvement in hearing.

Examined by allopathic specialist by the request of the mother who declared it hopeless.

Tellurium in various potencies from 30th to the cm effected a cure in three years.

---



## News and Notes.

*Radium in Homeopathy*—Radium was discovered in 1903 by M. and Madam Curie, French investigators. M. Curie is a homeopathic physician of Paris and we are proud of him. It is now being used by the homeopathic physicians as a remedy in various ailments. Its proving was made and we hope clinical verification is needed to make it a useful agent in relieving human suffering.

We used it as Radium Bromide in the 30th potency in rheumatism, cancer and various kinds of ulcers and various skin diseases. One of our colleagues prescribed it for a case of cancer of the uterus in an elderly lady where other indicated remedies failed and some benefit was derived.

*Diet.*—This is a very difficult subject to handle in a small space. Suffice it to say here that proper diet is all that is necessary in the maintenance of health and the cure of the sick. Meat diet is resorted to by the civilized people throughout the world but it is not at all necessary in the usual work in life. Many things may be said against meat diet.

*Milk Supply*—Milk is the staple article of food among the Hindus, both for infants and adults. We are sorry the supply of milk is very much deteriorated. In the first place the price of milk has gone up so high of late that it has become a luxury rather than absolute necessity. In the second place it cannot be easily procurable in unadulterated form. In the southern

part of our city, go along bring cows in the houses and milk supply is pure. But it is not so in other parts of the town. Our Municipality is now taking vigorous measures for the purity of milk supply everywhere.

*Vaccine Therapy.*—Following appeared in the Homeopathic Recorder. In a leading editorial on this subject the *Lancet* says "Practical medicine is in a hurry for new and more effective remedies and the maxim to prove all things is forgotten in the desire to advance." The hurry may be from a desire to advance, spurred on by a foreboding that the means in vogue are not what they should be. The editorial was brought out by Sir Almroth E. Wright's latest vaccination against pneumonia, and the editor concludes with the hope that some will "emphasize the fact that vaccine being potent agents capable of doing harm, when injudiciously employed, should be given only with a sense of responsibility," &c. In the meantime the homeopath will do well to stick to his time-tried and genuinely scientific remedies.

*Too much medicine.*—Allopathic doctors are often found to give too much medicine to their patients. Their prescription consists generally about half dozen medicines at least and this is too frequently given in four and twenty hours. Besides it is very often seen that they prescribe for every thing in a patient. We mean to say that they have one medicine for fever and one medicine for constipation something for headache, some application for this or that in one patient.

It is not so in homeopathic practice. The doctors here have one medicine administered for the case in hand and very seldom repeated, if some benefit may be observed. This is what the discoverer of Homeopathy enjoins. But we are sorry to see that this advice is not strictly carried out by the so-called homœopaths. Like their brethren in the allopathic camp, they want to treat diseases and not patients and very often give too much medicine and thus spoil their cases.

---

### OXALIC ACID SYMPTOMS.

Dr. J. H. B. Fry contributes a paper to the *Lancet* recently on "Decalcifying Action of oxalic acid." Among the symptoms observed from the effect of *oxalic acid* were tenstching of the muscles, muscular weakness, fall in blood pressure, cyanosis, collapse and loss of consciousness, all of which is attributed to the precipitating of the calcium salts by the acid. In the nervous system there was observed cerebral excitement, in the cutaneous system exudative erythema, in the urinary system large quantities of albumen passed, in the alimentary system persistent vomiting and constipation, and the conclusion is that *oxalic acid* poisoning manifests in all regions of the body, due to the precipitation and removal of the lime salts. The three cases on which Dr. Fry bases his observations had taken from 2 to 3 ounces of the drug. He notes, as above the marked symptoms, but in his report of

the individual cases we note there were the following symptoms :—

Face livid extremities cold and blue, cyanosed and skin cold and clammy.

Heart and pulse very weak, but variable.

Convulsive twitchings of muscles.

Little urine passed but highly charged with albumen.

Constipation with thirst and dryness of throat but no soreness, vomiting persistent for a week. Muscular weakness and mental depression amounting to neurasthenia.

—*Homeopathic Recorder.*

---

## NUX VOMICA,

BY D. M. GIBSON, M. D., ST. LOUIS, MO.

Nux vomica is derived from the seeds of a tree bearing the same name. This tree is short with a thick usually crooked trunk, and one species growing in the island of Java and differing but little from the officinal plant, is used by the natives to poison their arrow tips. This poison is prepared by boiling the root in water until the residue is a thick extract, and this is known as the deadly upas mentioned by the poet Longfellow.

The nux vomica bean or seed is an orbicular disk nearly an inch in size with thickened edges, is hairy, and when this is removed exposes the dull brownish seed. This seed is inodorous but very bitter, and,

since it contains strychnine, is poisonous, as is doubtless all parts of the tree.

Medicinally, it is prepared by powdering the dried seeds—no easy task let me say—and from the powder so obtained we may obtain the alkaloids, strychnia, brucine and igasuria.

Nux, like its alkaloid, is a powerful poison, but acts differently in different animals, affecting the frog and dog quickly, violently and fatally, while the hen, cat and sheep are not affected, though ruminants, while able to take as much as ten grains of strychnia per oram, die from a much smaller dose given into the veins.

Experiments have proven, or, at least, led to the conclusion, that it does not act upon the brain, the muscles or the nerve trunk, but upon the gray matter of the spinal cord and the vasomotor centers ; that in small doses it excites and stimulates these vasomotor centers, and in large doses paralyzes them ; hence, it slows the pulse but does not in doing so affect the pneumogastrics,

Powdered nux or fluid extract applied to the skin is a powerful irritant, and if applied to a denuded surface its effect is much more prompt and violent. In full doses it stimulates the secretion and excretion of urine, loosens the bowels and acts as a general tonic, but if long used produces directly opposite results. It is likewise one of the best remedies known in the treatment of alcoholism, acute or chronic.

As a tonic, laxative, a general tonic, and a medi-

cine for the stomach, it is much used by the old school brethren, and many a Homeopath could well employ it with good results in like conditions. Its symptomatology is wonderful, varied and complex.

In the beginning I said the beans grew on a thick, somewhat stout and usually crooked tree, so also the subject best suited to the action of Nux is the person of stout constitution, positive, usually dark of hair and complexion, with pronounced veins, positively and often forcibly expressed, too often short tempered, cross and irritable ; in short, a subject well set in his ways or having lost the vigor and vitality of youth, he frets at his condition and the condition of all about him ; is cross with himself and all about him. He sits with drooping eyelids, sallow skin, torpid liver, deranged stomach, constipated bowels and dribbling or retained urine ; he forms a picture of unhappy old age.

Nux is a contrary remedy, and this contrariness is seen in all its symptoms ; for instance, the constipation alternates with diarrhœa, and while the stomach is sour and the condition may well be termed gastric catarrh, the throat and nasal mucosa will be dry, giving rise to obstruction of the nose and a dry cough. Pain when it is present under the influence of Nux is intermittent, violent for a time but soon subsiding, only to return at short intervals like the convulsions occasioned by a poisonous dose of the drug.

Thus in headaches it is most useful in so-called sick headaches or for that dull ache in the frontal por-

tion of the skull occasioned by overwork, over-indulgence of any kind or loss of sleep.

Nux<sup>1</sup> does not act upon the brain but upon the sympathetic system and those nerves arising from the spinal cord, hence the patient considers himself worse than his physical condition shows him to be really.

Nux is looked upon as a good remedy for piles, and for those of the internal variety use just enough Nux to rouse the abdominal brain ; stimulate its action as well as rouse up the dominant portal circulation, get rid of the hard, ' dry fæces and gathering toxins, and presto, the piles go their way.

Varicose veins it will not cure, neither will it remove broken hæmorrhoids ; these are not proper subjects for medication, they belong to the surgeon.

Neither will it cure prolapsed uterus, but it does help in this condition, relieves the sense of weight and engorgement, reduces the attendant leucorrhœa, tones up the bladder, relieves the despondent mental condition and materially aids whatever local measures may be used.

Nux is a fine remedy in malarial conditions when all other remedies fail ; as a rule, Nux will cure—the conditions are all masked by medicine or otherwise—the chill comes any old time and comes often after the patient will have shivers with a temperature of 102°, and at the same time exhibit cold hands and bluish colored nails, while heat externally applied aggravates his condition. Sweating is not well marked, but if it appears is sour and affords no relief, Nux will unra-

vel this tangled condition and give us a clear picture of the case ; for example, Nux will often have to be followed with Natrum muriaticum or Sepia. Seldom will it cure completely if unaided. (Missouri Institue.)

—*Medical Century.*

---

## A CARBO VEGETABILIS PATIENT AND A PUZZLING DIAGNOSIS.

BY C. S. TISDALE, M. D., JOPLIN, MO.

Introductory.—This case is reported because it shows what to do and what not to do, or *when to consider* a thing to be a characteristic symptom and *when not to consider* it a symptom.

This patient was an elderly woman over 83 years of age. I first saw her some time during the latter part of October, 1913, at Carrollton, Mo., when she was in her usual state of what she considered good health for her, when she was free from pain and not complaining. Had I known what I now know I would have learned that she was *naturally a persistent talker*, one of those persons who have to tell you all of their family history, troubles, etc. and will not give you time to get a word in edge wise, as they say. But I did not make the acquaintance of this woman when she was in her average normal health.

Right here let me say I made a great mistake, and my first failure came from it.

Lesson 1.—This is *not to overlook the getting of a*



*knowledge of people when normal.* May the younger members of our profession learn this lesson now and profit by mistakes that nearly cost me the life of this patient.

Let me now proceed by stating that this woman had supposed she had "asthma," and as the physician whose practice I was caring for, and other physicians, had never disputed her diagnosis; I was not given a chance to diagnose the case for myself; in fact, my own services were not called for, but at certain times she would send in for a small vial of a combination "asthma" tablet, that my predecessor had been prescribing for her. And besides this she had been using a quack nostrum, which contained some opium and stramonium, as I learned latter. And so this misguided drugging for a still more erroneous diagnosis went on under my repeated protests until December 26, 1912.

About this time I was called to her home about six miles in the country, and found her complaining of a very VIOLENT PAIN, neuralgic in nature, extending over left eye and passing through to back of neck. She had never before had any kind of a head pain, and was frightened to death, and so were her relatives with whom she was living. There was no other symptom to be found without a careful and personal observation of the case. Some of you may be able to find the homeopathic similimum on that one symptom, but I confess I can not. So I sent my livery team home and remained with the patient all night.

As her pains were not endangering her life, I composed myself, gave her sugar of milk powders, with the suggestion that it was a nervine and would quiet her to rest. She got easier, but the pain persisted. I found that her supposed "asthmatic spells" consisted of smothering and choking up sensations, in which she felt a terrible oppression and constriction about neck and chest, as if her breath was being crushed out of her.

That looks asthmatic, but in her case she could lie still and sleep and never have a spell. Her spells came on only during the day time when she was awake ; always on first exerting herself in the morning and sometimes after a prolonged and severe exertion.

These smothering states were most severe when the wind blew from either south or east, and in spring time as the frost was leaving the ground.

By inhaling the smoke from burning her quack asthma nostrum she was able to get instant relief.

In connection with these spells she had been troubled with a slight hacking cough associated with a tickling in the trachea ; and such a state had troubled her for years.

Had I prescribed Nux vomica to offset the results of intense drugging and clear the case up, perhaps I would have done better for the patient.

But all of her common symptoms, such as the smothering, the oppression, the  $\angle$  by exertion, the morning  $\angle$ , the spring aggravation, the leftsided head

pains, and the aggravation by east and south winds are strong symptoms of Lachesis. And because I failed to perceive the great loquacity and talkativeness of the patient when normal, but did notice it when she was sick, she got Lachesis.

Here, then, is lesson 2 : Be sure that you do not mistake things that are normal in the person and consider them as symptoms of the patient.

With the common symptoms of Lachesis present, and believing loquacity to be a strong mental symptom, I prescribed Lachesis 30<sup>th</sup>, because of its great loquacity in connection with the other symptoms, and gave her one dose of the 30<sup>th</sup> centesimal potency, placing the powder on her tongue.

After this she received placebos very freely for some time, but persisted in taking her usual dope in connection in spite of my protests.

Results : The head pains all ceased. There was a marked relief of the smothering states but not an entire giving away of the symptoms.

Now here observe a rule laid down by the Organon and emphasized by Kent : *When a remedy which is only partly similar by fitting a few of the more common symptoms of a case is administered in suitable dose and potency, those common symptoms may go away to all appearances, but they are in reality only suppressed and held in check for a time by the remedy.*" This is just what happened, but I was not convinced of this rule at the time, and took the apparent improvement for real progress, and this is the third lesson this paper teaches..

We must learn how to determine when a remedy is acting as a palliative and when it is acting as a curative power.

Now follow me till late in January, 1913, and we learn that our patient was growing sick to her stomach ; that she got an idea it was the medicine (placebo) we were giving her that made her sick, and refused to take any more of it. And neither did she confer with us, but doped herself with first one thing and then another, mostly homeopathic remedies furnished other members of the household for stomach trouble by my predecessor.

Her condition grew worse, the old head pains returned, and with them a very severe and obscure complaint developed. And an allopathic physician was called and pronounced it pneumonia ; but why such a diagnosis I could never learn.

For two weeks she took his large and strong doses, and went from bad to worse.

Here you will observe the old head symptoms returned accompanied by others, which pertained to her chest and lungs and her entire organism.

Lachesis had palliated and suppressed the case ; its action had become exhausted ; and then the sickness returned with more violence than before.

Here is our fourth lesson : "When a case has been suppressed its symptoms return in time and with greater severity than before." I am convinced that had I not given Lachesis at first all of the symptoms, which appeared later, would have appeared then, but

with less violence and less danger, but fortunate as it was, they returned in the same image as when they left. First the head symptoms, then the chest and body symptoms.

I was again called on February 18th, 1913, and found :

Patient very restless, full of anxiety and fever ; over-sensitive to the heat, sensitive to weight of her clothing ; soreness over chest ; much mucus in bronchial tubes and air cells ; great loquacity (as I believed) with an onset of pain in left side of head. Because Lachesis had relieved her before, and because I failed to realize it had acted by suppression, I again gave her Lachesis 200th.

Feb. 19th she reported feeling better, and so she received placebo.

Feb. 22nd I was called again, and found her choked up with mucus ; there was a loud rattling respiration which was heard all over the house. She declared she was dying, and the expression of her features looked like death. She was weak and prostrated, yet had to be propped up in bed to get her breath.

She complained of smothering and of choking ; she wanted the windows open and the fires put out, and threw the covers off from her ; declared she was burning up, while her hands and feet and body were very cold ; and all this was evident in a room where it was too cold for the comfort of others, and when it was freezing weather on the outside.

With all this she was constantly wanting some one to fan her, and fan hard at that ; it took two people to do this fanning for her.

By this time my faith in Homeopathy was beginning to leave me, and all faith in Lachesis was gone.

Had I then realized the lessons I have since learned results might have been better, but I was ignorant, and something had to be done.

That terrible rattling and gasping for air at once reminded me of Antimonium tartaricum, and in my excitement and haste she got Antimonium tartaricum 30th with relief for a few moments only, when it had to be repeated.

Here learn the fifth lesson. The patient had been failing, the sickness had been increasing its violence, and now it could not be suppressed by any of the remedies related to the more common symptoms ; but this I did not know at the time. Again witness the waste of time in prescribing on keynote symptoms.

I was now with patient day and night, and found that the urine had become scanty, offensive, high colored, with brick dust sediments, complete loss of appetite, absence of thirst and bitter taste in mouth.

Let it be said now that at no time did she have temperature ; in fact her temperature was a little below the average normal.

By the morning of the 23d I discovered the patient to be a person of changeable moods, with weakness of memory and absent-mindedness, also common to Lachesis and many other remedies.

By the night of the 23d conditions were desperate. Lachesis had failed to relieve, Antimonium tartaricum ceased to relieve, and still I imagined I had a loquacious patient.

Aided by Kent's Repertory I now made a careful study of the whole case, using loquacity as a strong symptom.

Stramonium and Lachesis alone seemed to fit the case, and since Lachesis had failed I tried Stramonium, and waited over the 24th, 25th and 26th to get results, and found the patient to be rapidly failing in every way, as the disease process was increasing.

By the evening of the 26th we discovered that during the night time there were paroxysms of hard, dry, harsh coughing, but that during the day time the cough was loose, with profuse, thick, green, offensive, stringy expectoration. Patient was now so prostrated that urine and fæces ran away without any consciousness or control on her part. Death seemed very near; patient was told she must expect to die any hour, and friends accordingly advised, but with the tenacity of a lion at bay we determined to try further efforts. On February 27th it dawned into our block-headed nature that loquacity was not a symptom at all, that the grand feature of this case was that of a COLD, FEEBLE, CHILLY PATIENT WHO FELT HOT, and HAD TO BE FANNED. And discarding loquacity from our case another repertory study was made, and this time Carbo vegetabilis and Sulphur ran through the case in its entirety.

A comparative study was now made of these remedies and Carbo vegetabilis decided upon. My confidence in Homeopathy was lost, and my faith in a single dose broken because of a very strong article I had just read in a former homeopathic publication. 'And so in my desperation I lost my reason and did some very foolish things. I gave three powders of Carbo vegetabilis 30th, one every two hours, and placebo, and returned home convinced that all hope was lost and my work only an experiment. Being a long way from the case I left two doses of Carbo vegetabilis 200th to be given at 6 and 8 the next morning if the patient was then alive.'

Feb. 28th, morning report by telephone, apparent slight improvement. Afternoon still more improvement reported, appetite and strength returned with increased thirst and urination. During the night before several hard coughing spells.

March 1st, morning improvement more marked after midnight of night before. Placebo only continued.

At P. M. reported not so well, with headache from prolonged coughing. Carbo vegetabilis 200th, one dose, followed by marked aggravation.

March 2d, had hard, hacking cough off and on all night. Bowels now costive, urine improved, but still so weak she could not retain it.

Patient no longer complains of being too warm; can stand covers much better, and did not need to be fanned.



Here, then, learn the sixth lesson : "Consider the circumstances under which symptoms are manifested that we may determine their value."

It is very common for anyone having feverish heat to want to be fanned, and it is common for most of us to want to be fanned when it is very warm and sultry, but it is very STRANGE, RARE, PECULIAR, uncommon and nearly unexplainable to find one who is OLD and WEAK and ANÆMIC with *poor circulation, with coldness of flesh, who desires to be cool and to be fanned.*

Hence in this case the desire to be fanned becomes of vital importance, it alone reveals the true image of the patient and the remedy.

Now another thing : I at last gave the right remedy. The patient had responded to the first dose by slight aggravation, after which came improvement. I should have let well enough alone, but did not, and so by giving too many doses I aggravated the nightly coughs more than was necessary.

Fortunately I did not have as much of an aggravation as I would have had had the patient's vitality not been so weak.

However, my patient was improving in the right way, but I could not desist giving a cm. of Carbo vegetabilis, but very fortunately from a graft that I learned was without strength, and was discarded afterwards as no good.

(To be continued.)

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL XXIV.]

FEBRUARY 1915.

[ No. 2.

---

## ADDRESS.\*

Fellow Members of the Calcutta Homeopathic Society.

It is with great pleasure that I stand before you to welcome you to the deliberations of our dear society's meetings. I thank you sincerely for electing me again as the President of this learned body. I served you some years ago in the same capacity to the best of my ability but now I am in the verge of my years, it will be very difficult for me to do my duty to your entire satisfaction. However I shall try my best and with your co-operation shall do my duty as much as lies in my power.

You may remember, about a decade hence when we met together to inaugurate this society our aims and aspirations were to form a fraternal congregation of believers in the art and science of medicine

---

\*Delivered by Dr. P. C. Majumdar, President, Calcutta Homeopathic Society 1915.

promulgated by the illustrious and immortal Samuel Hahnemann. Now gentlemen, we have the time and opportunity to enquire how far we have been successful in our attempts. In this discussion and investigation it will be my endeavour to observe every thing dispassionately and say all to the best of my ability.

Forty years ago when I commenced my career as a homeopathic physician, I had the ardent ambition, though it was visionary at that time of seeing Homeopathy recognised and practised throughout the length and breadth of this vast country. I had a vision in my mind, that as, Quinine and Castor oil are to be found in almost every household in Bengal, so if before I lay down my reins I can see Aconite and Belladonna, Nux vom and Sulphur are to be found in all villages, in all the Provinces of India, I shall think myself fortunate. It is now for you to judge how far this utopian idea is realized.

By the conjoined efforts of all homeopathic practitioners in this country, both lay and qualified, I now find that much has been achieved in this direction. Our master enjoins us to work for the cause of Homeopathy. Here in this country Homeopathy has much to depend for its propagation, upon our exertion to spread it far and wide. If we neglect to do it, we shall be responsible to man and God. In this connection I can not forbear quoting our master's own words to this effect. In proving drugs upon our own healthy body, he says "*That man is far from being animated with the true spirit of the homeopathic system, is no,*

*true disciple of this beneficent doctrine, who makes slightest objection to institute on himself careful experiments for the investigation of the peculiar effects of the medicines, which have remained unknown for 2500 years. Without this investigation (and unless their pure pathogenetic action on the healthy individual has previously been ascertained) all treatment of disease must continue to be not only a foolish, but even a criminal action, a dangerous attack upon human life."*

"It is somewhat too much to expect us to work merely for the benefit of selfish individuals, who will contribute nothing to the complete and indispensable building up of indispensable edifice, who only seek to make money by what has been discovered and investigated by the labors of others ; and to furnish them with the means of squandering the income derived from the scientific capital, to the production of which they do not evince the slightest inclination to contribute."

Gentlemen, here we have a rebuke from our master ; and let us now see what we have done for the advancement of the cause of Homeopathy in India. Our illustrious deads who have gone before us, practised one system of medicine with considerable ardour and did a great deal of its advancement. But they have done so far to establish the name and reputation of the new science of medicine among the people they have practically planted the banner of Homeopathy in the fertile soil of India and left us a good heritage and it is now our duty to do more to give proper nourishment to thrive it. What have we done in this direction?

In answering that question I must admit that we are doing some ; but still much to be done. We are trying to teach Homeopathy by establishing schools and colleges, we have one journal to advocate our cause to the public and we have established homeopathic hospital for the poor and for the clinical instructions to our students. Still much to be done. This Society has great possibilities in its sphere, but I am sorry to say the members are not so worthy of it as they should be. They must attend diligently its every sitting and must read valuable papers and court co-operation and friendship among themselves. This is a critical time, our opponets are trying their best to crush us and wipe out our existence by the aid of legislature and other means at their command. We must now be united and do our duty manly.

It undoubtedly becomes evident to most of us that Homeopathy is not growing as rapidly as it should. Cry of homeopathic aid is heard from various places in this country. People have considerable faith in the efficacy of homeopathic medicine but they cannot get good homeopathic physicians and surgeons to help them. We are busy with our over aggrandisement, to make money and pass our days in pleasure and meriment, as if we have no other object. We must remember that we have a principle to guide us, we have a Divine Law of healing and we must show our loyalty to it and to do our duty in propagating this truth far and wide.

During my recent travel in the upper Provinces of .

India I found that the lack of homeopathic physicians is greatly felt. I was much delighted to find one charitable institution in Dheradun where people get abundant homeopathic help from Dr. T. C. Mukerjee's homeopathic charitable dispensary. This noble minded gentleman Dr. Mukerjee consigned every furthing of his earning to this institution. He placed his property in the hands of the united Province Government. On my way, I had been to Aligarh a flourishing city where Mahomedan College shines forth its educational lustre, there is only one homeopathic physician who is a pupil passed out of the Calcutta Homeopathic school. He has a large number of patients. In the city of Agra I met only a young gentleman but homeopathy seems to be in darkness. Here is a good field. You know gentlemen this at one time claimed to be the queen of Indian cities in times of the great Moguls—Akbar and his successors and it needs homeopathic assistance very urgently. I passed through Cawnpur where old, venerable and truly Hahnemannian physician Dr Mohendra nath Ganguli is doing yeoman's service to our cause. He is a kind hearted gentleman, a true friend of the poor and his success is immense. There are some physicians in the old Mahomedan capital of Lucknow and Dr Pathuk and his enthusiastic son are trying for Homeopathy there. The allopaths recently have a good college there but we have nothing of the sort here.

The premier city of Allahabad is without a staunch advocate of our system of medicine. We certainly

want one to place our banner in this soil. I know many gentlemen here who have some faith in Homeopathy but no help available here,

Our sacred city of Benaras has some disciples of Hahnemann but they are not united and so their position is not worthy of the name. Bankipur claims our friend Dr Pares Nath Chatterjee—a calm, sedate, pious, and enthusiastic homeopath. But recently Bankipur becomes the capital of Behar and more hands will be required. Here we want to see a college and hospital. Here we expect it, for in this city the renowned Imam brothers, both Ali and Hassan are staunch believers in the superior healing power of our medicine. Only an organisation is required for its fulfilment. I hope our brother Pares Nath will try his utmost for its realization. In Lower Bengal our adherents are numerous and only we require strength of organisation to place Homeopathy in proper place in the medical world.

Now gentlemen I must finish as you have a very important duty to perform, I mean the discussion about smallpox. As you know this year at the present moment we have signs of the out break of this dire disease. Every body thinks that with the advent of summer there will be likely an epidemic invasion of small pox in our city. So I ask your help to say something from your personal experience about the prophylactic and curative virtues of our remedies. I know we have many homeopathic remedies that have wonderful efficacy in this disease. Once more I accord

you a hearty welcome to our society and thank you from the bottom of my heart for electing me as your president.

---

## CASE I.

URANIUM NITRATE, 12, 6, IX AND AC. PHOS 18TH.

POTENCY.

As we were walking by the side of the jubilee Tank in Pabna Babu Jagodis Chandra Ray, one of the pleaders of the judges Court and Zemindar of Harinabaghati, came forward and told me "Sir, my brother writes me that you have wonderfully cured Isan Kabiraj Mohashaya of our village of the dangerous long standing Diabetes Mellitus."

One of the pleaders of the court, who died of the same disease, asked me "Is there my specific for Diabetes Mellitus in your Homeopathic system of medicine? In reply to his query we told him "We have no specific for any disease in Homeopathic system of treatment, ours is symptomatic treatment. For our great immortal master Hahnemann says that "Totality of symptoms is the outward image of inner disease."

We found our patient with following Symptoms :—

Sad and very anxious for future ; disinclination to speak ; dullness of the head and inability to think ; roaring in ears with difficult hearing ; Complete loss of appetite ; excessive thirst ; Constant eructation of gas most of the time burning sour eructation; acidity in



stomach ; a great swelling in the region of stomach ; pressive pain and stitching in the pit of stomach ; pulsating : weak ; heat over the whole body in the evening followed by restless night ; frequent copious micturition since several days ; obstinate constipation,

Acidum Phosphoricum 18, and Uranium Nitrate 12, 6, Ix were administered in attenuation, every three hours, and the patient got full recovery within a fortnight to the great astonishment of all physicians there, as the case was pronounced to be entirely hopeless. Since then our patient is doing well.

## CASE II.

Sremati Harimati Gupta, Age 18 years :—

She was taken down to Calcutta to cure chronic ophthalmia (as they call it).

She was put there under the treatment of the best specialist of Eye-Diseases, for two and half years, but to no effect. The vision was so much impaired that she could not know whether there was a candle in dark room, though she could see better while she was under no treatment.

Her husband Satis Gobind Sen took a service there for her treatment. He too suffered very much from Fistula-in-ano. Being radically cured within a short time, he had a firm determination to place his best half under our treatment though his father-in-law was quite against it. As Satis Babu was desperate, he did not hear him. Hence he was obliged to come to seerajunge with his daughter. After their arrival the girl's father

asked me "Do you hope to cure my daughter, and if so within what period ? In reply we told him, "you will get proper answer after 48 hours." We found the patient with following symptoms:—

Eyes were painful and red, and covered with white membrane ; eyelids also inflamed ; frontal pulsating headache, sometimes extending to the occiput ; always feverish, temperature rose at 3 P.M ; the right ovum region was more painful than the left one ; tensive pain in the whole lower abdomen ; leucorrhœal discharge ( most likely gonorrhœal ) ; menstruation suppressed ; always fearful, thinks some one comes after her ; head hot, while extrimities cold ; easily startled ; burning of eyes ; heat on the top of the head ; want of appetite ; fretful ; pain in throat.

Her husband had all sorts of venereal diseases and also a psoric subject, and she too shared the same fate with her husband.

The patient was to be treated according to the section 232 of the *Organon of the Art of Healing*.

We prescribed three doses of Belladonna 1000, to be taken every sixteen hours. When two doses were taken burning pains in the head specially in both the eyes were so intolerable that she cried out "Papa I will die before daybreak, I never felt such burning pain when drops of lunar caustic were applied in my eyes, and artificial ulcers were made in both my cheeks, necks." "Is it your infinitesimal dose of your Hcmeopathic medicine that causes insufferable pain ?" Asked her father to his son-in-law who is a passed student

of late Dr. M. M. Bose's Homeopathic School. "I think it so" replied he. Our patient was so, between 1 and 3 A. M. At 4 A. M. she felt some very hot tears burst out from both her eyes. She said it was as hot as boiling water, and after a couple of minutes she exclaimed "Papa, is there light in the house, I see it, and unbearable burning sensation is almost over, doctor's medicine will cure me and call the doctor. And her words were realized. There not only she got her eyesight, but also became pregnant after four month's treatment.

We treated the patient with Antisorics, Antisyphiliacs and Antisyctotics from the following remedies, of course with attenuation, at long intervals. The following were the drugs :—Belladonna, Petroleum, Ac. Nit, Thuja, Aurum met ; Sulphur. Calcarea Carb. Silicea, Pulsatilla and occasionally Merc. Sol, according to symptoms developed. We must cure below 200th potency.

We cannot but mention here that our patient was so very sensitive to the action of Homeopathic medicine that we had to administer a few of the remedies by olfaction.

NILAMBAR HUI.  
Serajgunge ( in Pabna.)

---

### THINGS MEDICAL.

We have recently had passed in the usual official manner a medical registration Bill with all sorts of

benevolent intentions and with all the usual protestations of impartiality. It is therefore interesting to note the case of Dr. Axham in England the victim of the tyranny caused by these Bills. He was struck off the register for "infamous" professional conduct in assisting the famous bone setter Mr. Barker with anæsthetics. The "Times" wrote after the decision: "It is time Dr. Axham was reinstated in a position from which he ought never to have been driven seeing that the only ground for taking his name off the medical register was that he assisted a master of manipulative surgery to relieve human suffering for which no relief could be found elsewhere." The last eight words embody a truth which, of course, hurts orthodox medical feelings. The case has excited great indignation in England against the medical monopoly and is a sample of how these things are worked. In 1853 the doctors in England discovered that the science of healing was practised by a number of ignorant persons, and the system admitted of great abuses and quacks fattened on the credulity of the poor, etc. a good deal of which was true. They brought in a registration Bill to secure a uniform standard of education an authoritative register of duly qualified medical men so as to assure the public and the introducer said, as they have since said and apparently always say on these occasions, "There was no intention of interfering with the rights of the public. He was disposed jealously to guard the right of the private individual to consult whomsoever they pleased whether they were learned or un-

learned. The member for Edinburgh objected that the Bill did not go far enough—as it did not propose to do away with “quacks”, the name for homeopaths and those who practise other systems of medicine. however, the Bill passed in the supposed interest of the public and the result was, of course, to restrict the right of private individuals to consult whomsoever they pleased whether they happen to be learned or unlearned. Legislation frequently behaves like that Indian legislation especially.

Lord Elcho predicted that these medical corporations would at once misuse their power. Lord Ebury said : “The ostensible object of the Bill was to remedy the anomalies that at present existed in the medical profession of the country ; but the real effect of it would be to secure a monopoly to these various associations. . . . They were going to confer a monopoly in the practice of medicine in this country upon persons who themselves said that they had no confidence in that practice. What said Dr. Bailey before he he died ? He feared he had done more harm than good.’ What said Dr. Chalmers in his general oration over Dr. Williams ? Why, ‘that he had no confidence in medicine.’ What said Dr. Forbes ? Why, ‘that the present practice of medicine was so unsatisfactory that he hoped some new school would be set on foot.’ ” The army doctors in India are not so diffident, They know everything there is to be known and a lot more.

—*The Indian Daily News.*

---

## HOW TOBACCO HURTS THE HEART.

"Tobacco heart" is a condition well-known to physicians. It is really a phase of arteriosclerosis, due to excessive smoking and is generally characterised by angina pectoris, a severe pain in the chest. The New York Medical Record, commenting on some statistics published in Germany by Dr. J. Pawinski, says the important conclusion to be drawn from them is "that tobacco has a certain, possibly a specific, affinity for the coronary arteries." These are the arteries of the heart itself, those that supply its muscles with blood.

. That nicotine is a powerful poison has long been known, but there has been a wide divergence of opinion as to whether tobacco smoke contains nicotine or not. The investigations of Zulinski and Zebrowski prove that it does. The quantity of nicotine absorbed by the body from tobacco smoke is probably small, and if smoking be indulged in with moderation it will not injure healthy adults, but when carried beyond the limits of moderation or when indulged in by young people it is certain to do harm to the heart.

Its effect is to cause a considerable thickening of the inner membrane of the coronary arteries, a pronounced degeneration of their middle coat, which is composed of muscles, and marked changes in the muscles that contract and expand the heart, thus bringing about disturbances of its rhythmical beating.

---

## HEATED MILK NOT BEST, BUT SAFEST.

"There is some difference of opinion as to the effect of heat upon the nutritive and digestive qualities of milk," said Dr. E. W. Titus of Washington, in addressing the Galen Society of the District of Columbia. "In answer to one of the chief objections to the use of heated milk, that the heating 'devitalizes' it, authorities state that heating milk to 140 degrees Fahrenheit for twenty minutes does not seriously affect the enzymes, and that if it be granted that milk contains 'life,' it has lost the last vestige, of it after twenty-four to forty-eight hours, especially when kept under such conditions that it contains myriads of bacteria.

In the boiling of milk, proteins are considerably altered, coagulation of certain albuminoid constituents takes place, thereby rendering them more difficult of digestion. It is stated that there is quite a loss of vitality in the milk as the result of heating at high temperatures, and further, that it has been observed by many medical practitioners that there is a very distinctly lowered vitality among infants fed on boiled milk, the processes of absorption being delayed and the quantity of milk required for the nourishment of the child being greater. It is generally agreed that digestibility of milk diminishes with cooking. But among authorities consulted the prevailing view is that when milk is properly heated there is little or no prejudicial influence excited in this respect.

"The heating must be done intelligently and must

be properly supervised. After heating, the milk is just as liable to serious contamination as before if not more so, and therefore must be carefully guarded and kept cool. When all is said, it will be found that the objections raised to the proper heating of milk seem to be either theoretical or such as may be readily overcome. The writer feels no hesitancy in taking the view that the only practicable solution of the problem of obtaining milk in its least objectionable state at the present time appears to be proper heating. Theoretically, it should not be necessary ; practically, we find it forced upon us.

---

## A CARBO VEGITABILIS PATIENT AND A PUZZLING DIAGNOSIS.

( *Continued from page 32 No. 1. Vol. XXIV.* )

As it was there followed an accumulated effect as you will soon learn.

March 3d, general improvement going on, and some old symptoms of past years coming back after years of suppression. Placebo now continued.

March 4th reported improvement. March 5th and 6th continued improvement, with a continuance of the placebo.

March 7th, continues to cough ; loose by day, dry and hard at night ; < after midnight with thick, greenish, offensive expectoration. Headaches over entire



head come on every morning and go away at sunset. Placebo continued.

March 8th and 9th, same conditions prevail.

March 10th, same condition present with great sleeplessness and restlessness at night.

By this time I had recovered from my rattled condition of mind, and my faith was being 'restored, and I had learned what to look for after a remedy, or, in other words, to make a prognosis from the action of a remedy. And perceived in these new states the over-action and accumulative effect of too many doses and that this must be antidoted.

Sulphur having run along side of Carbo vegetabilis in our repertory study we gave Sulphur 30th, one dose, followed by placebo, and continued this placebo till March 14th. During this time the patient again improved, with less of the disagreeable features. March 14th, case ceased improvement, and Sulphur 200th, one dose, was given.

March 15th reported cough gone during night and better rest at night, but with cough and headache all over during the morning.

March 16th patient reported to be losing strength and coughing all the time with headache and nausea.

However patient's appetite was good, she ate with a relish, had no more smothering spells, and no more choking spells, and no desire to be fanned.

Here was a Sulphur over-action, but I did not realize it at the time, and again fear seized me and hope deserted. I ought to have waited and let the

symptoms settle into some order, but did not. I only thought to palliate, as I had again given the patient up to die. So I gave Stannum 30th but with no change in the case.

March 17th patient now losing strength and appetite. Complained of being too warm and had to be fanned. I was then convinced that the Sulphur action was exhausted, and the over-action of Carbo vegetabilis antidoted as well as all curative action brought to an end.

Now I watched and waited and by the 18th all the symptoms had returned as they were before, save that the patient was not as bad of as before.

Convinced of my mistake in too much dosing I yielded at last to the teachings of Kent and the great masters, and determined to give one single dose of Carbo vegetabilis 30th, and the smallest I could make. So I gave just one single granule, placing it on, her tongue, and followed this by a placebo.

Immediately there was a very gentle and mild aggravation lasting a few hours and then wearing off.

March 19th patient feeling much stronger, able to raise herself up in bed for the first time since her sickness.

No more smothering spells, no more choking spells ; does not have to be fanned. The hard coughing spells have gone, and only a light hacking cough left, such as she had had for years. Urine less offensive and more of it, less offensive odors from patient's breath, and only a slight headache.

Patient continued improvement till March 25th, when she was able to get up, put her clothes on, go about the house, feeling fine in every way, and much better than she had been in many years.

On this date we placed the patient on sugar of milk tablets as a placebo, and she continued improvement during the next two or three weeks, by the end of which time she was reported as being well in every way.

In conclusion, let me state that we did not see the patient after March 25th. On this date I made a final examination of the case and found a large cavity about the size of a dollar in the upper right lung, which I believe had been forming for years, and which had been filled with mucus during her sickness, and that because of such tissue changes in vital structures she could not hold up under the higher potencies. Kent advises not to go lower than the 30th nor higher than the 200th in cases where we have such tissue changes in vital organs.

A number of examinations of the urine had persistently shown pus in the urine, presumably from a cystitis of long standing, as she had always had bladder trouble.

After March 25th an examination of the urine revealed it to be normal, no more pus cells being present.

Not having any defined history to make one think if such cavities having been formed, and not finding any positive signs of any in our first examination, we failed to suspect their presence.

We have never been clear in our diagnosis of this case, but one thing we do know and that is the last we knew of this patient, several months afterwards, was that she had gone on to an almost perfect recovery, that is to say, her old smothering spells never troubled her again, and she became strong and free from all symptoms and able to come and go from her home to town and do housework and relish life. So that aside from irreparable tissue changes, which must ever remain the same, her disordered life has been restored to a state of health and order.

Whether or not this patient had been going into a slow tubercular state or not I cannot say, perhaps the cavity resulted from an abscess in former years. This much I can only say, she had a remarkable chest expansion when I last examined her. The apex of each lung was well filled with every respiration. The chest was not flattened, but on the contrary it was well rounded for one of her build.

The temperature of pneumonia was absent to my mind. She had a marked form of bronchitis with catarrhal infiltration of the air cells and of the cavity itself. We have no theory concerning the cause of her smothering spells, and no name for the condition existing with them.

The final lessons we learn here are : That diagnosis cuts no figure in the homeopathic art of prescribing so far as the indicated remedy is concerned ; that the very smallest dose may bring about a cure when greater dose would kill ; that it is better to wait and

watch and be sure of our remedy and not to be in too great a hurry to change it or interfere with it when once it begins to work, and never to repeat until the symptoms have returned the same as they were before. I trust we may all derive some practical and helpful pointers from the discussion of this paper, and it is with such a hope as this in mind that I have been influenced to present this report for your consideration.

---

### CRATÆGUS.

This remedy was given a thorough proving a few years ago, and this gave for the first time clear and definite indications for its use in heart disease. The following symptoms are those experienced by the provers, and I have verified several times their value in several cases. The provers experienced difficulty in breathing ; slow pulse, which in one case dropped to 58 a minute ; dyspnœa ; the dyspnœa was so marked in one case that the prover had to go to the window for air.—*A. E. Hinsdale.*

—*Medical Century.*

---

### CONVULSIONS IN INFANCY.

BY S. SIGMUND RAUE, M. D.,

Professor of Pediatrics, Hahnemann Medical  
College, Philadelphia, Pa.

The cause of general convulsions in infancy is looked upon in the majority of instances as being "idiopathic." The abnormal tendency which infants

show to convulsions has been ascribed to instability of the motor centres in the cortex of the brain, due to a lack of development of the inhibitory centres. This explanation has been generally accepted until recently. We are now, however, obliged to take a different view of this matter, since the new facts that have been brought out by advanced physiologic studies, especially in the domain of the metabolism of the mineral salts, offer a more definite knowledge of the etiology of convulsions. The role of certain internal secretions in the metabolism of the mineral salts also has a direct connection with the convulsive tendency.

The immediate cause of general convulsions is cortical irritation in the majority of instances. There is no doubt, however, that certain children will react with a convulsion to a stimulus which in other children would fall short of precipitating such an attack. A strong peripheral irritation may let loose a convulsion in those predisposed. True pathologic lesions causing convulsions during childhood are meningitis, encephalitis, cortical hemorrhagic lesions, embolism and thrombosis. They may occur during the acute infectious diseases or as a complication of endocarditis. A predisposition to convulsions is very likely unnecessary with such gross lesions. The hemorrhage over the brain cortex resulting from difficult labor or from forceps injury is due to rupture of fine blood vessels in the pia mater (pial hemorrhage). General convulsions may also be toxic in origin, the convulsion ushering in one of the acute infectious diseases.

The so-called idiopathic convulsions of infancy occur in a child that shows no evidence of a brain lesion or of an acute infectious disease. There may be the history of an attack of acute indigestion preceding the attack, or the child may be teething, but these disturbances hardly justify the development of convulsions. Fever is usually slight or altogether wanting. The nutrition, however, is usually found to be below par, or signs of rickets may be present. Furthermore, a careful examination of the child's nervous system will reveal a generally heightened irritability of the motor nerves and perhaps a latent tetany. Attacks of laryngismus stridulus may also be noted in the previous history of the case. The increased electrical irritability of the motor nerves, and the presence of Chvostek's sign and Trousseau's phenomenon reveal the latent tetany.

Epilepsy may begin in infancy, and convulsions at this time of life may therefore indicate the onset of epilepsy. Such an occurrence, however, is exceedingly rare. The majority of cases of epilepsy begin in later childhood or in early adult life.

I shall confine my discussion mainly to the role played by the mineral salts in disturbances of the nervous system. Briefly stated we may say that the salts of the monovalent elements, mainly potassium and sodium, exert a stimulating and exciting effect upon the protoplasm of the nerve cell, while the divalent elements, calcium and magnesium, exert a sedative, or inhibitory effect. The importance of sodium chloride

for maintaining the heart beat illustrates one of the actions of this salt. A remarkable fact which has been discovered in experimental studies with the salts is that a solution containing a single salt may be toxic, while a combination of salts will prove to be non-toxic. Thus sodium chloride alone will destroy certain forms of marine animals. while the addition of potassium and calcium overcomes this toxic effect.

This fact explains why Ringer's solution, which contains sodium, potassium, and calcium, will keep a frog's heart beating longer, than normal salt solution. It has been stated that were it not for the calcium in our blood our muscles would be in a constant state of contraction.

The abnormal irritability of the cerebral cortex of an infant's brain, therefore, in the absence of a pathologic lesion such as a pial hemorrhage or a meningitis, can very logically be attributed to some disturbance in the balance of the mineral salts. We are justified in accepting this view not only from the clinical observation of these children but also on the grounds of certain pathologic studies. A deficiency of calcium in the brains of these children has actually been demonstrated.

The primary cause of the disturbed calcium metabolism may be a deficiency of calcium in the food ; even breast milk may be deficient in this element. More frequently, however, it is due to an increased excretion of calcium chiefly through the intestinal tract, resulting from improper feeding (Milchnahrschaden).



as Czerny calls it). The frequent occurrence of convulsions, in infants suffering from intestinal disorders and from rickets is thus made clear.

---

## SOME IMPORTANT ASPECTS OF APIS.

BY E. W. RUDE, M. D.,

Illon, New York.

A drug so commonly used and of such a marked value to every homeopathic physician as apis, needs no introduction.

The very characteristic effects of the sting of the bee furnish unerring indications for its employment.

Apis is a deep acting remedy. Of use when the inflammatory process is severe with threatened pathological changes of a serious nature.

Farrington describes the inflammation of apis as "A rosy pinkish hue which spreads rapidly, the pains become intense. They are of a burning, stinging or shooting character, seldom throbbing. The heat of the part increases with the burning and stinging pains. This may end speedily in resolution or it may go on. If it pursues the latter course, you will notice that this redness, this rosy appearance becomes more intense, in fact resembles erysipelas in appearance. Still later it changes its color and takes on a pale but bluish hue, the swelling pits on pressure showing that the parts are oedematous. After a while if the conditions of the system are such as to permit, gangrene of the part takes place.

"The inflammation produced by apis is not then of a sthenic type. It is not, for instance, such as would be cured by aconite, quick, sudden swelling of the part coming on rapidly and ending in resolution ; not such as would be cured by belladonna, bright red swelling with throbbing pains but ending either in resolution or suppuration ; but it is such as goes on to destruction of tissue."

Apis acts powerfully upon the kidneys producing an acute inflammation. The urine is highly albuminous and contains casts. Local oedema is usually present especially about the eye lids.

It may also be indicated in sub-acute or chronic Bright's disease.

Through this action upon the kidneys we obtain the characteristic effect upon the cellular tissues, manifested by acute oedema, both of the skin and mucous membranes.

In general dropsy it is an invaluable remedy. It is chiefly indicated by the whitish waxen transparent appearance of the skin. This dropsy generally comes on rapidly and predominates in the upper part of the body and the face. One peculiar symptom which helps in the choice between apis and other remedies in dropsy is the almost absence of thirst.

In meningitis or in meningeal irritation apis holds a prominent position as a curative agent.

It is often the remedy, no matter what the ailments, when shrill outcries in sleep, lead to the suspicion of cerebral irritation.

In the exudation following pleurisy, apis is one of the best remedies we have to bring about absorption of the fluid.

Apis may be used in rheumatism whether it is of articular or muscular origin. It is more frequently indicated in articular or what is commonly called acute inflammatory rheumatism. You will find the affected parts feeling very stiff and exceedingly sore to any pressure and often with a sensation of numbness. The joint or joints affected are swollen and give to the patient a kind of stretched-tight feeling.

The swelling is of rather a pale red in color. There are burning, stinging, pains worse on any motion and intolerance to heat.

A short time ago the world was startled by the wonderful discovery of the bee sting cure for rheumatism and the old school dwelt upon on the fact that it was responsible for the newest things in medicine.

Little did they realize that we as homeopaths had been using this drug for this purpose with remarkable success for many years. But through an over sight this fact had not been published with glaring headlines in the daily press.

Apis is indicated in ovarian neuralgia with the abdomen extremely sensitive to touch more especially on the right side accompanied by the burning and stinging pains.

On the mucous membrane of the nose, throat and bronchial tubes it has a marked effect with its character-

istic inflammation and producing a dyspnea which is very distressing.

On the skin it causes a form of inflammation resembling erysipelas with a tendency to destruction of dermoid tissue, and an eruption develops resembling urticaria.

Apis resembles and is in close relationship with arsenic, acetic acid, belladonna, rhustox and sulphur.

It acts better when used in the triturations than in the dilutions.

The action of apis is slow, and if given when the symptoms warrant its use the results are certain, and by its use you will be able to see not only the beauty of the principles of homeopathy but to gain the everlasting friendship and gratitude of your patient as well.

---

## AN ACONITE CASE.

By C. T. HAINES, M. D.,

Utica, New York.

*Aconitum napellus* is one of the very oldest and most valuable of drugs, and since the days of Hahnemann and other provers has probably been prescribed by homeopathic physicians more frequently than any other remedy in our materia medica. The drug has been made a medicine.

Its physiological and curative actions are well known to us all and I call attention to its use in the following case not because of any new or unusual

indications, but to emphasize again its quick and satisfactory action in a serious condition that had resisted other treatment for several weeks. August 17th, I was called to see Miss A., principal of one of our public schools ; and elicited the following history :—Had not been up to her usual standard of health for two or three months ; felt that she was working too hard ; about the first of June, one month before the close of school, her work began to “get on her nerves” and her appetite and strength failed her almost entirely ; found it difficult to get through the day and dreaded the thought of to-morrow ; could not easily remember the names of her teachers and others ; could not think of any food that she thought would taste good to her ; gave way to tears at the slightest things ; ate very little and drank almost no water ; began to worry about her work and feared the superintendent would dismiss her ; consulted a physician who prescribed a liquid tonic and advised giving up her position ; began to have very restless nights, and slept but little after the first two or three hours ; dreamed about her school constantly when asleep and awoke more tired than upon retiring ; no appetite ; constantly worried about being dismissed ; consulted her physician frequently and took considerable medicine without much improvement, but managed to get along with her work until schools closed ; expected to go with her sister and some friends to the St. Lawrence river, but learned that through some misunderstanding the cottage which they had occupied for several seasons had been rented

to another party until August first ; great disappointment, but decided to wait until that time ; engaged a dressmaker for two weeks and stayed in the house all the time ; began to be exceedingly nervous, tearful and despondent, sleepless, with neuralgic pains about the head and face ; no appetite, constantly worrying about one thing or another.

By August first, she was too ill to go to "the Islands" and was in bed the greater part of the time ; medicines did not seem to relieve or help her in any respect and her sister and friends became alarmed at her condition and decided to make a change in treatment. I found her in bed with a temperature of 100, pulse about 120, unable to sleep ; very nervous and restless ; great fear of dying, great fear that something was going to happen ; difficulty in swallowing ; constantly grasping her throat and trying to swallow ; pains in head, face and about the heart ; frequent looking at herself in small mirror which she kept under her pillow ; wringing her hands and pulling her fingers ; wiping her face with her hand or handkerchief ; constantly moving about in bed, sitting up and lying down, and presenting a wild and staring expression indicative of acute insanity. There were other symptoms which I will not mention as I consider them of secondary importance. Heart action too rapid, otherwise normal ; lungs negative, urine negative, abdomen negative, menstruation scanty but regular. Prescribed *aconitum napellus*, in water, two teaspoonfuls every half hour for six hours, then every hour if awake ;

water to drink every hour ; *hot*, not boiled, clam broth, containing the finely chopped raw clam ; malted milk, raw egg in orange juice, raw fruit juices.

Soapsuds and saline enemata until bowels were thoroughly emptied, then once daily ; massage, oil rubs.

The aconitum was first given about 1 p. m. and the patient slept three hours during the night and the greater portion of the next day. Mental and nervous condition began to clear up almost immediately and rapid and marked general improvement commenced. The diet was rapidly increased and pushed, and the remedy given less and less often.

No other remedy for about two weeks except some digestive tablets. Later, ignatia and hydrastis were given as seemed indicated. The patient went back to her work in school, although contrary to my advice, exactly three weeks from the date of my first visit, and declared herself in her usual good health, except somewhat below her normal weight.

There were many things that might be considered in reviewing a case of this kind, but the time will not permit. I will simply say that I consider the aconitum, plus food and water, plus good nursing and good sense, did the work.

—*The North American Journal of Homeopathy.*

---

## THE MEDICAL SAND BURR.

Dr. W. J. Hawkes, a medical practitioner of much

experience, read a paper on the subject of vaccination before the Southern California Homeopathic Medical Society, from which the following extracts are made. The entire paper is printed in the *Pacific Coast Journal of Homoeopathy* for November, and we regret that the ENVOY'S space is too limited to reprint it entire ;

#### IS IT SAFE ?

"My answer to the question as to its safety is, emphatically and unequivocally, no ! It is not safe to inject into the helpless blood circulation, matter derived primarily from a diseased animal or a deceased human, even though it has been passed through a series of possibly healthy animals.

"What is the origin of the commercial vaccines now in use, and which vaccine propagators style 'pure calf lymph ?' I will let acknowledged authorities answer :

" 'Dr. S. Monckton Copeman, of London, England, who holds the official position of Medical Inspector of the Local Government Board, has declared that for the purpose of protective vaccination, "the most satisfactory material was found to be vesicle-pulp, obtained in the post-mortem room, from cases of discrete small-pox that had died during a comparatively early stage of the eruption." This pulp from the human cadaver is triturated with dilute glycerine after the fashion employed in making glycerinated vaccine lymph. Inoculation of this specially prepared small-pox "lymph," Dr. Copeman tells us, was carried out by means of linear incisions on the previously shaven



and cleansed area on the back of a monkey, between the shoulder blades.' "

So it goes from corpse of human to monkey, from monkey to calf, and from calf to child. They call it "medical science."

Concerning "cow-pox" Dr. Hawkes said :

"It has been remarked by Mr. James Moore assistant director of the National Vaccine establishment of London, England, that 'if the cow could plead her own cause, she might assert that what we call vaccine did not originate with her. She might retort upon us, that it was the contact of man which polluted her pure teats, for no cow that is allowed to suckle her own calf untouched by a milker ever has this complaint ( cow-pox ).' "

SECOND : DOES IT EFFECT ITS PURPOSE ?

"The only evidence offered in support of the claim that vaccination prevents or appreciably modifies small-pox, is the fact that the disease is less prevalent than it was prior to the beginning of vaccination ; and the further claim that persons in a family or community who were vaccinated subsequently to the outbreak of the disease, were less severely attacked than the original case, or altogether escaped the disease. If there is other evidence it has escaped my search.

*( To be continued. )*

*—Homeopathic Envoy.*

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV. ]

MARCH 15, 1915.

[ No. 3.

---

## MATERIA MEDICA.

### ASTERIUS RUBENS.

It is a good remedy for sycotic diathesis ; flabby and lymphatic constitution ; irritable temperament. In cancer of various organs it is useful. We have derived benefit from it in a case of uterine cancer of a cachectic and emaciated woman. It may be of service in an attack of apoplexy. Easily excited by any emotion, especially by contradiction.

Heat of the head, as if surrounded by hot air ; sanguinous congestion to the brain.

Apoplexy ; face red, pulse hard, full, frequent. Hence it is a useful remedy for apoplexy.

Cancer of mammæ ; acute lancinating pain ; drawing pain in breast ; swollen, distended, as before the menses ; breast feels drawn in.

A livid red spot appeared, broke and discharged ;

gradually invaded entire breast, very fetid odor ; edges pale, elevated, mammary gland hard, everted ; bottom covered with reddish granulations.

Gait unsteady ; muscles refuse to obey the will.

Epilepsy : twitching over the whole body, four or five days before the attack.

A case of epilepsy under our care was much benefited by this medicine. In some instances the approaching disease had been checked.

Constipation : obstinate ; ineffectual desire ; stools hard, round balls, like olives.

Diarrhœa : watery, brown, gushing out in a violent jet.

Sexual desire increased in women.

#### AURUM MURIATICUM NATRONATUM.

It is a very useful remedy in many complaints but it is generally neglected. I have used it very extensively.

Its mental symptoms resemble much the Muriate of gold.

Very violent headache mostly on the left side. In patients with mercury and syphilis.

Destruction of nasal bones and ulcers in nose. Bone pain is very often cured by it. Symptoms are worse in cold wet weather.

In cases of jaundice with white stools.

In syphilitic cases—chancres, ulcers, warts, bubo.

Its action in female genital organs is unique. I have

used it in various affections of this organ with marked effect.

Enormous distention of the ovary..

Induration of one part and softening of other parts of the uterus.

I cured an obstinate case of uterine neuralgia and disorder of menstruation by this remedy. An elderly lady gave birth to a son twenty years ago and no child since then. She was otherwise healthy. In her menstrual time she used to suffer much. I gave her several apparently indicated medicines without any effect. At last a lady doctor examined her carefully and said that some parts of the uterus were soft and other parts, especially near the neck is very hard. Relying upon this condition I gave her Aurum muriaticum natronatum and she made a perfect recovery.

I also cured one case of endocervicitis in a young lady. The diagnosis was made by the lady doctor attached to the Lady Dufferin Hospital in Calcutta.

Dr. Burnett thought it as one of the best remedies in uterine tumor.

Ovarian enlargement, even dropsy.

Leucorrhœa, corroding the parts.

Scirrhus or carcinoma of the breast or uterus.

All symptoms are aggravated by rest.

Profuse and premature menses. Habitual abortion.

Our allopathic friends are using gold in various affections of the uterus and ovary.

Dr. Hale recommends it in puerperal mania with sexual excitement.

## CALCAREA OSTREARUM.

Leucophlegmatic constitution.

Irregular and deficient development of bones, open fontanelles.

Constitutionally fat, obesity.

Coldness is a characteristic of Calcarea Ostrearum. Coldness, general, local, subjective and objective. Aggravation from cold. Disease arising from working in cold water or aggravated by it. Here it rivals Rhus-tox but Calcarea is a chronic of Rhus-tox and is more of a constitutional remedy. Sweat in various parts of the body, general and local. Head, axilla, hands and feet.

Acidity, heart-burn. Sour vomiting, sour eructations, sour taste and even sour diarrhœa. Easily fatigued, dyspnœa in going upstairs, great debility.

Tendency to take cold easily. Cough and night-sweat. Glandular enlargement and inflammation. Various tumors. We have been able to cure many cases of uterine fibroid with Calcarea.

Consumption or phthisis pulmonalis has been cured by the timely administration of this remedy.

The above are the principal features of Calcarea ostrearum. Depending upon these we are able to cure very obstinate cases which defy all other treatment.

## LYSSIN.

### THE SALIVA OF A RABID DOG.

It is also called Hydrophobinum.

The sight or sound of running water or pouring water aggravates all complaints.

Depending upon this symptom I saw Dr. B. L. Bhaduri cure a case of obstinate dysentery.

Lyssophobia ; fear of becoming mad.

Bluish discoloration of wounds (Lachesis).

Complaints resulting from abnormal sexual desire ( from abstinence, Conium ).

Mental emotion or mortifying news always makes him worse.

Cannot bear heat of the sun (Gels, Glon, Lachesis, and Natrum c. ).

Convulsion : from dazzling or reflected light from water or mirror (Stram.) ; from even thinking of fluids of any kind ; from slightest touch or current of air.

Headache : from bites of dogs, whether rabid or not ; chronic from mental emotion or exertion.

Saliva ; tough, ropy, viscid, frothy in mouth and throat with constant spitting.

I have cured a case of unnatural salivation with above characteristics by Lyssin 200.

Sore throat ; difficult swallowing, constant desire to swallow.

Prolapsus uteri.

P. C. M.

---

## THE MEDICAL SAND BURR.

(Continued from page 64, No. 2, Vol. XXIV.)

“Neither of these claims is well grounded. The claim that vaccination is the cause of the acknowledged decrease of small-pox during the past century, is supported by precisely the same evidence as would be the claim that vaccination has been the cause of the acknowledged decrease—nay, the practical eradication of yellow fever, cholera, the plague, etc. It has been since Jenner’s time that all these filth diseases have been minimized and robbed of their terrors in civilized communities. But it was not vaccination that did it ; it was not the injection of animal corruption into healthy human beings. It was rather the *removal* of filth from their food, drink, bodies and environment that worked the wonder. It was hygiene—cleanliness in its broadest meaning—which made a health resort of Panama, the plague spot ; which made of Cuba a place almost as healthy to live in as Southern California, and which made Southern California a habitation where one is as little likely to have small-pox as he is to be struck by lightning.

“It would be much more reasonable to argue that vaccination has been active as a causative factor in the acknowledged increase of cancer and tuberculosis during the time since the rite became a worldwide practice. In these days of asepsis and antiseptic measures, it is surely more reasonable to presume that

increase in these terrible diseases is caused by injection of disease products into the blood, than to assert that the same unsanitary practice is the cause of the decrease of another disease.

“Dr. Oidtmann, staff-surgeon of the Imperial German Army, and chief physician to the hospitals at Verdun and St. Quentin, during the Franco-German war, says : ‘Shortly before the war with Germany, the whole French army was revaccinated. This general vaccination tended rather to extend small-pox than to protect against it.’ Referring to Germany, Mr. Oidtmann says : ‘Our German municipal records show thousands of cases of attack and death from small-pox, even in newly vaccinated persons.’

“Dr. Stowell, of London, for thirty years a public vaccinator, says : ‘The nearly general declaration of patients enables me to proclaim that vaccination is not only a delusion, but a curse to humanity.’

“R. Hall Bakewell, M. D., M. R. C. S., author of ‘Pathology and Treatment of Small-pox,’ writes : ‘I have very little faith in vaccination even as modifying the disease, and none at all as a protective in virulent epidemics.’

“Dr. J. A. Hensel, late surgeon in the German army, declares : ‘In June, 1888, I was on duty in Strasburg, and over two thousand small-pox cases were in the pest house, every one successfully vaccinated but three months before. I was laid up for five weeks altogether, vaccinated for the seventh time. In 1898 I witnessed the amputation of three arms and



the discharge of four men from the army for general debility, all from vaccination. After this experience I am convinced that vaccination is no protection against small-pox. One hundred and twenty-nine thousand, nine hundred and forty-eight vaccinated, revaccinated, and re-revaccinated people died of small-pox in Germany in one epidemic, in spite of the finest medical skill and care in the world.'

"A large majority of the medical profession of to-day believe in and practise vaccination, and regard with pity or contempt the minority who condemn the practice. So also did the majority in the eighteenth century advocate and practise inoculation with straight small-pox virus, and claim it to be one of the greatest blessings ever offered to suffering mankind by the medical profession, until the practice was universally prohibited by law ; but not until it had made the scourge almost world-wide ; and I repeat, not only a majority, but the whole of 'scientific' medicine of that time advocated and practised that stupid crime, and unreservedly condemned all who entertained any other opinion."

The foregoing are detached extracts from Dr. Hawkes' paper, "Health." Board and School Board men ought to read them.

—*Homeopathic Envoy.*

---

## CALENDULA AS A SURGICAL DRESSING.

S. T. VON MARTINETZ, M. D., A. M., CEDAR RAPIDS, IA.

I desire to add my testimony to the action of *Calendula* in the treatment of severe lacerated wounds. At one time, when in a distant city, I was called to see a young man, who had had a very severe injury to the elbow joint from being caught in a thrashing machine. All the usual antiseptics had been tried by the physicians in attendance. Suppuration had set in, in spite of the treatment, and the pain was extreme. The attending physicians demanded an immediate amputation. The father insisted on my seeing what could be done, by conservative methods.

I made a lotion of *Calendula*, and instructed that it be kept applied by means of wet dressing, for from twelve to eighteen hours. If there was no benefit at that time, the attending physicians were to proceed with their amputation. But to the delight of all concerned the benefit was so pronounced, when the dressings were removed the next day, that they desired to continue the treatment. I prepared then a quantity of the lotion, and advised them as to its continued use.

I left town on that day, but I learned subsequently that the cure was a very satisfactory one, with the exception that the joint was stiff from adhesions. Later, he fell on the stiff arm, breaking up the adhesions by accident, and at the suggestion of his

physician he kept up motion in the arm, until almost the entire normal action was restored.

At another time I was consulted for a young lady who had been thrown from a cart in a runaway, and had been dragged a long distance, on the shoulder and arm. The shoulder had the skin and deeper tissues torn away so that the joint was bare and there was laceration on the side of the body, beneath the axilla, leaving the axillary artery bare and in plain view.

This wound was thoroughly cleansed, and was kept dressed with *Calendula* for a number of weeks, and notwithstanding its extreme severity, the restoration of the torn and lacerated parts was very satisfactory. It was especially noticeable that the skin which formed over the denuded surface to the extent of at least twelve square inches, was very natural, and there was but little scar tissue and no deformity.

My last case is that of a young man whose hand was lacerated in a leather cutting machine. The skin was torn from each finger, from the tips to the palm, so that the hand resembled that of a skeleton. I washed the fingers with the *Calendula* solution, and made a persistent application of this dressing. The hand was redressed daily, healing took place slowly, but all the fingers were movable to a degree, the scars interfering with the movement only to a limited extent. He is now an attorney and makes no complaint about the hand, which would probably have been amputated, but for this treatment.

I generally use this remedy in the proportion of

one ounce of the tincture to a pint of water, but I prefer the single remedy in surgical cases to any mixtures, though I often give internal treatment as a tonic or restorative.

I use this remedy also in burns, but in these cases I combine it with a small proportion of *Arnica*, and with powdered alum. In the treatment of simple forms of sore eyes, I use *Calendula* in very weak solution and the results are the very best.—*Ellingwood's Therapeutist*.

(To this we may add that besides the tincture there is the *Succus calendule*, which, as the name indicates, is the pure juice of the fresh *Calendula* plant, which, by many physicians, is preferred to the tincture. This juice contains just enough, 87 per cent. alcohol, to preserve it from fermentation. A bottle of one or the other should be kept in every house for emergencies. Apply it direct to the cut, torn or mangled flesh, and healing is generally prompt.—EDITOR OF THE HOMEOPATHIC ENVOY.

---

### GLEANED THUJA CASES.

Girl, aged twenty-six ; had a dry, branny, eruption upon the eyelids, chiefly about the cilia, which had existed for years ; eyelashes irregular and imperfectly grown ; the scales covering the skin were very fine, and the eyes weak and watery. *Carbolic acid* lotion had no effect. *Thuja* cured in a month or six weeks. The sister of the patient, pityriasis of the face, fore-

head, neck and ears ; worse after washing in warm water and during the day-time. *Thuja* 30 cured in a month.

(Fungus on the lower jaw.) On December 27th last, Mrs. K. brought to me her daughter, aged ten, apparently a blooming young girl. The mother informed me that her daughter was 'in the habit of exchanging chewing-gum with the girls of the place, and attributed to this fact that she now had something in her left lower jaw, the location being that of the first molar tooth. The other physicians to whom application had been made informed her that the tumor or fungus must be cut out with a piece of the lower jaw bone. Before permitting this disfigurement she decided to try me. The fungus looked *purplish, bled easy* and had a *stem*. The father of the child I knew to be sycotic, if not more ; the mother, on the contrary, was a woman of fine frame and health, having borne several children. The fungus became more *angry* in *damp weather*. In addition to this, the girl had an eruption like "Zoster around the abdomen." Appetite good, sleeps well, and only fears cutting. Prescribed *Thuja* 6 dec., one dose, morning and night. From this time on the girl improved, and the size of the dose was gradually lessened, till about the middle of February. At this time the mother thought that a little cauterization would accelerate the cure. In order that she might be convinced of her error, I applied *Potassa caustica*. Like manure to a wheat field, the fungus grew again. From that time to March 20th

she never interfered with my *Thuja*, which was given about three times a week. Now the fungus or tumor is entirely well ; it left a very slight carious exfoliation of the jaw, but it went off after two or three doses of *Silica* 30 trit. The child is now perfectly well.—*Dr. T. Meurer.*

Ranula in a woman æt. 30. Veins under tongue varicose ; excess of venosity everywhere, especially in the throat. *Sulph.*, *Ham.* and *Puls.* failed, but *Thuja* 30 benefited her.—*Dr. Ussher.*

Whooping Cough. Two scrofulous boys. *Bell.*, *Cupr.*, *Dros.*, without effect. On the fifth day, the doctor observed those little ulcers in the mouth as described by Bolle and Goullon. *Thuja* 30, three times a day. Well in a week.—*Dr. Bojanus.*

Asthma, with little cough, but sensation as if something was grown fast in the region of the left lower ribs. *Thuja* 30.—*Dr. Stens, Sr.*

—*Homœopathic Envoy.*

## HOMEOPATHIC REMEDIES IN DISEASES OF THE EYE.

HERBERT DANA SCHIENCK, B. S., M. D., O. ET A.

CHIR., F. A. C. S.

While homeopathic remedies have been known to the specialist as of distinct value in diseases of the eye, many members of our branch of the profession fail to appreciate or use this valuable adjunct in their practice.

When the New York Ophthalmic Hospital came into the hands of the homeopathic school in 1868, the surgeons who took up the work there, headed by the late Timothy Field Allen, searched homeopathic literature for cases of diseases of the eye which had been cured by our remedies. The results were very meager. Either the diagnosis was obscure, the alleged cure doubtful, or the symptoms too vague for an opinion to be formed of the real nature of the malady. These surgeons, however, soon began to build up a clinical record. The patient was examined with two distinct objects in view, first, to make a thorough diagnosis; second, to obtain symptoms, local and general, which would indicate the remedy. Dr. Allen says that he spent a large part of an afternoon at times on a single case, and followed this up by pouring over the materia medica a large part of the night to find his remedy.

This enthusiasm for accurate homeopathic prescribing has been imbibed by a large part of the students who have attended the clinics in this hospital, and it has been the rule with a large part of the staff to think in terms of the remedy for their cases rather than to figure out to a nicety the diagnosis and exclusive local treatment.

To think in terms of the remedy ought to be a mark of distinction between a homeopathic physician and his old school brother. While the diagnosis is important and, at times, aids in differentiating the drug, the point of extreme importance to both the patient and the physician is what will cure. This

laying of stress upon the naming of the disease and making that the starting point for the cure must result in failure in a large number of cases, particularly where the selection of a remedy is going to be made by means of the Law of Similars. It is carrying the diagnosis far to a most unfortunate length, when, in a number of States, like New York, the law ignores therapeutics and says that a knowledge of materia medica is a speciality which the medical student must master after he leaves medical college. That diagnosis should be held to be so much more important than treatment is so fallacious that it would seem to me that a mere statement would condemn it in the minds of all right-thinking men. The Board of Regents in New York State, about seven years ago, took this stand and had influence enough with the Legislature to pass a medical law in this shape. This centers the attention upon a point that's of secondary importance in selecting our remedies and of minor importance to the patient who is not so much interested in what he has as how he can get rid of it. To know that you have an iritis will give you a clue to a group of remedies which may be required in any case, but you may find that the conditions of the individual are such that his remedy will be found far outside the general line of remedies usually prescribed in iritis.

It may be useful in certain cases to have in mind the brilliant pathological generalization that Gelsemium is useful in intra-ocular inflammations characterized by serous exudation ; or that Rhus tox. is



good for suppurative, intra-ocular and orbital inflammations ; and Bryonia for plastic exudations ; with Aconitum uncinatum for ciliary and peri-orbital neuralgia. The therapist who is contented to prescribe upon such generalities as these, however, will have many failures. Pilocarpin may be required instead of the Gelsemium ; Silicea in place of the Rhus ; Phytolacca, in place of Bryonia and Spigelia instead of the Aconite. The decision must be accurate and prompt in diseases of the eye ; probably more than anywhere else delay is dangerous. We can only decide by a close study of the symptoms and individualization of the case.

The condition of a diseased eye is important in selecting the remedy, but as eye diseases are often the expression of a general cachexia, the remedy can only be found by a close examination of the whole individual. "In the beginning the surgeons at the hospital were not handicapped by any prejudice in favor or against any drug because of their diagnosis, and we were perfectly ready to prescribe any drug in the materia medica from A to Z for any form of disease. While it has been found that but few drugs are appropriate for certain pathological states, new remedies may be found indicated and any case may require a drug hitherto unused for its cure."

The work on ophthalmic therapeutics which was gradually compiled by Dr. Allen and others and finally published as Allen's and Norton's Ophthalmic Therapeutics has really gone through five editions,

the last being published in 1903, contains symptomatology of 148 drugs ; Boyle's Therapeutics of the Eye, published in 1896, contains 198.

Many cures have been cited by Drs. Allen and Norton in their therapeutics, and the earlier Transactions of the Institute and our journals contain valuable reports of the use of homeopathic remedies in eye conditions.

Recently one of the practitioners in Brooklyn consulted me concerning a case he had a few months ago confined where there was much albuminuria with anasarca preceding the confinement. Dimness of vision developed soon after the baby was born and the case, as related to me, was so clean-cut for a Phos. that this was suggested and made a very brilliant cure. I recently saw the case and found that the vision, at the present time, was nearly perfect, and that there were few evidences of the hæmorrhages which had dotted the retina in the vicinity of the macula and optic disk. Phos., for many retinal conditions, is extremely valuable, preventing degeneration and blindness in many cases.

Jaborandi is a remedy that is probably too little used in asthenopic conditions dependent upon irritable weakness of the ciliary muscle ; those cases where the vision is constantly changing and the patient sees at one moment at a foot, and at another at three feet. It has relieved a case of irritability of the ciliary muscle with nausea and vertigo, which was always brought on by looking at objects. It may help in a limited way in weakness of the internal recti.

Conium is another remedy too often missed in cases of muscular weakness and inability to use the eyes.

Besides the fatigue, there is usually hyperæsthesia with great photophobia, the lids are heavy with indistinctness of vision and some smarting and itching. Occasionally there is diplopia. Conium may also relieve the inflammatory conditions, where hyperæsthesia is the principal symptom without much redness or other signs of inflammation. The Rhus tox. patient has more inflammatory conditions with the intense photophobia, a suppurative instead of a watery mucous discharge.

Natrum mur. and Ruta grav. are two other remedies in muscular weakness. In the former you have a sensation of dryness in the eyes with a feeling as of a foreign body, with burning and inability to look long at any object. Objects are confused and letters blurred. This makes the remedy particularly useful in muscular defects, where there is drawing and a stiff sensation in the muscles with smarting after use, and sometimes with morning headaches. Natrum will sometimes help in clearing up cases where strengthening the muscles or prisms has not wholly cured the condition. In Ruta the eyes burn excessively, feeling as if they were on fire, with aching after use in accommodation : the eyes feel fatigued and the vision seems weak, as if the eyes had been excessively strained. When you have the symptoms of heat, aching and blurring with a weak ciliary muscle, Ruta will usually help materially in curing the case where.

the proper prescription of glasses and the correction of the muscular trouble does not speedily relieve.

Some years ago, a woman, who was 64 years of age, came into my office, whose glasses had been fitted fourteen months before, correcting her hyperopia and a hyperopic astigmatism as well as presbyopia. She had no trouble with her eyes from that time until January 10/10, when she complained of diplopia which had followed a headache on January 9th. Between November, 1909, and January, 1910, she had a severe attack of shingles. There was left hyperopia of 8 degrees (Stevens & Maddox) and esophoria of 2 degrees. The patient was in good general condition. Prescribed Aurum met. 6, one pellet every 2 hours.

By January 13th the left hypertropia had increased to 13° Stevens, 20° Maddox, and the esophoria to 4°. By January 18th the left hypertropia was 24° Maddox and 12° Stevens, no complaints except from diplopia, objects being higher on one side than other.

Prescribed Kali iod. ix, 2 gr., 4 days.

This was continued until January 27th without material change in the hyperopia. Prisms of 9° base down and 10° base up were tried, but did not relieve the diplopia and were never worn.

Prescribed Senega 3x, one pellet every 3 hours.

This was continued until February 19th, with constant improvement in the hypertropia, which by February 19th was reduced to 6° Stevens, but still remained 20° Maddox. The patient did not at this

have to carry the head on one side to relieve the diplopia as she had before.

On March 2/10 had diplopia only when turning the head to one side (30° to the left or 30° up or down). By March 6th all diplopia was gone and there has been no return of it since.

The symptoms on which Senega was prescribed :

"When walking toward the setting sun and looking down, he saw an oval smaller sun hovering below the other relieved by bending backward and closing the eyes." Allied Caust. and Phos.

About a year ago at one of our county society meetings in Brooklyn, Dr. Ralph I. Lloyd reported the following brilliant result from the use of Kali bich. :

J. J., aged 44, complains of sudden loss of vision of the one useful eye. The left has been blind for years. Twelve years ago, and three years ago, has had similar attacks. Has never had pain except in the original attack.

The left eye is very soft, there is moderate circumciliary injection, pupil is occluded and secluded, and iris bulging.

The right is a trifle softer than normal, moderate circumciliary injection, pupil margin apparently adherent everywhere. Atropin does not show a single spot where the chambers can communicate, but there must be communications somehow, perhaps numerous microscopic channels between the adhesions.

There are a number of small specks on the posterior surface of the cornea. A.o.d. 10/200 without

glasses, 15/200 with —3.75 s.o.s. Can differentiate light and darkness.

No evidence nor history of gonorrhœal or syphilitic infection. Has had considerable muscular rheumatism and joint stiffness, but no acute inflammatory symptoms. Urine, sp. gr. 1014 ; albumin present.

Atropin, 1 per cent., one drop to be instilled in right eye three times a day, was ordered ; to demonstrate the adhesions and prevent more if possible. It had no perceptible effect upon the pupil. Because of the absence of pain and having faith in the efficiency of Kali bichromicum<sup>1</sup> in such cases it was given in the 2x tablet triturates every two hours.

A week later, vision with glasses was 15/70. Two weeks later, vision with glass was 15/40. Six weeks later, 15/30—one letter. Twelve weeks later, 15/20—3 letters. In spite of prompt improvement, an iridectomy was recommended for the right eye and removal of the left. He declined all operative interference and when last seen still held up to the last report.

Should this patient return for treatment today the first thing recommended would be a Wassermann ; if negative, a test for gonorrhœal infection. While such a report as to possible causative influence as given above was permissible a few years ago, now-a-days none of us would be satisfied to make a diagnosis of "Quiet Iritis" without investigating the cause by laboratory examinations. So this little report, besides showing the efficiency of Kali bichromicum in this

type of case, also shows that our methods of investigation have improved even in the last few years. Also we have not done our full duty unless the cause is earnestly sought for.

Paris quadrifolia in eye conditions. To show the value of one symptom prescribing at times I will give personal verification of the symptom of this remedy—"Pulling a string from the eyes to the occiput." During a nervous breakdown a year and a half ago the most persistent symptoms were pulsating from head to foot ; persistent nausea and vomiting ; as general symptoms and special eye symptoms, of inability to focus the left eye on print or nearby objects without pain more or less intense, and the sensation as though the occiput was trying to pull the eye back into a deep-seated telescope position. This continued for about six weeks when Dr. Blackman brought me some tablets to take every two hours. Sometime afterwards Dr. Warner telephoned asking how the eye was. When I told him the sensation was relieved in 48 hours he replied, "So the Paris quadrifolia worked." That was my introduction to a very good friend.

2. Hepar sulph. in ptyalism. The cause in the case in which this symptom was persistent was the continued use of anti-bilious pills, which evidently caused Mercurial poisoning. The water ran from the mouth for, at least, a month, when I gave him some Hepar and in three or four days it had practically stopped. The patient said he noticed a decided

change within the first 24 hours after taking the remedy.

In only a few diseases of the eye, and they are intra-ocular, are our allopathic brothers using treatment on any other basis than that they represent a purely local disease. In Wood's Ocular Therapeutics, a work that has compiled the best suggestions of the oculists of the world for the non-operative treatment of diseases of the eye, in the treatment recommended for conjunctival inflammations, corneal ulcerations, scleral diseases and even iritis and uveitis, few of the compilations contain any mention of any measures except local applications, cauterization and the sub-conjunctival injection of various substances. A few mention very incidentally the use of Arsenicals, Iodides, Mercurials, purges, cod liver oil, etc., as possibly of use, but depend upon the various local applications as their sheet anchors.

With our Apis, Arsen., Calcarea, Mercurials, our Rhus, Sulph, etc., we can greatly aid the purely surgical measures of cleanliness and antiseptis, etc. .

Every homeopathic oculist has seen Rhus stay a post-operative suppuration, which threatened the whole eyeball, check panophthalmitis and relieve corneal ulceration with satisfaction. His homeopathic remedies have checked iritis, choroiditis, scleritis and other destructive inflammations, saving useful vision.

The writer made the following statement before the American Institute in 1904, which, it seems to him, sums up the conditions very well :

"Since I began practising, I have constantly



depended upon my drugs to aid me in the treatment of my patients. Perhaps I do not depend on the drugs alone, but I do feel they are of the greatest importance in many eye conditions, and I would be greatly handicapped if I did not have their aid. This is particularly the case in intra-ocular diseases, *i. e.*, iritis, choroiditis and the various conditions of the retina and the optic nerve. Here the homeopathic specialist has everything to give his patient, while his allopathic confrere has to depend only on general lines of treatment of a dietetic and hygienic nature."

To summarize, we have demonstrated :

First.—That remedies administered according to the law of similars have positive and curative effects in the most destructive of eye diseases.

Second.—That the homeopathic oculist is surely one who can be pointed out as exemplifying the definition of a homeopathic physician carried by the transactions of the American Institute.

Third.—That his homeopathic remedy gives the homeopathic oculist a great advantage over his old school colleague, saves his patients from the knife many times and he is himself rescued from being "cast upon the rocks of materialism." "In his remedy he has a means of steering clear of these dangers and of taking his patient into the haven of safety and convalescence."

—*Medical Century.*

---

## SMALLPOX.\*

Smallpox has been prevailing in a virulent form this year in Calcutta, Serampore and the neighbouring villages from the beginning of winter, that is from the latter part of the Bengali month Agrahayan, Formerly it used to appear in the latter part of Magh or the first part of Falgoon i.e. from the beginning of spring which is called in Bengali বসন্তকাল ; hence the name of the disease is বসন্ত. But in course of time, if we mark minutely, we find that many natural events have had a thorough change. Cholera used to appear formerly either in the beginning of winter or in the middle of summer when the temperature was very high or very low. But in these days medical theories do not seem to hold water. Cholera is seen all the year round, that is during all seasons having no specific atmospheric influence like many other common maladies. Smallpox first appeared this year at Serampore near the Rishra Mill bustee among the mill operatives and thence it spread to the compound of Banga Laksmi Cotton mill. From the lower classes it began to spread among the better class of people, in the beginning of the month of Poush corresponding to the English month December. A respectable English lady, wife of the manager of the cotton mill, who came to India a little while ago and lived with her husband on the upper floor of the said mill, was attacked with a malignant type of this loathsome disease and fell a victim to it within a week. This created a great panic among the Europeans and

---

\* Read before the Calcutta Homeopathic Society.

Indians and attracted the notice of the Government, the Municipal Chairman, Sanitary Inspector and others. The chairman Babu Barada Prasad Dey took special interest and did his best to check its spread by engaging several coolies for keeping the bustee clean and made arrangements for burning charcoal, sulphur and tar throughout the affected area.' He also took prompt measures for vaccinating and re-vaccinating the inmates of the houses of all classes of Serampore and Chatra, but inspite of this the disease rapidly spread throughout the length and breadth of the Municipal area, and assumed a horrible aspect at Rishra. Doctors were even afraid to enter the houses of the affected. As there is scarcely any medicine in allopathy for this malady and as the most renowned homeopath Dr Gopal Chandra Gossain had been unfortunately taken away from this world, I had ample opportunities of attending numerous smallpox patients both at Rishra and Serampore. I had to attend almost everyday once or twice for more than a month the affected houses of respectable gentlemen of Rishra. The scene was horrible in the house of Babu Brojolal Srimani and Mohendra Lal Srimani and several other families. To speak the truth not a single member of the house escaped the contagion from the grandfather, grand-mother to the grand-children. Fifteen or sixteen inmates were all affected with smallpox (not a single case of chicken-pox) either of a malignant, confluent or discrete type. But I am very glad to say that (notwithstanding the remarks of Mr. Palit,

during the prevalence of the epidemic of smallpox in Calcutta in the year 1906, that he and the leading Physicians of Calcutta could not do anything in this dire disease) success in Homeopathy was brilliant and beyond expectation. I was fortunate not only to mitigate the distress such as awful burning sensation, unquenchable thirst and distressing headache of the patients but in most cases I was successful in bringing back the victims from the grasp of eternity by applying internal remedies according to the symptoms. The medicines in this year's epidemic which answered most markedly were Antim Tart, Bell, and Sulphur, Apis mel, Arsenic Alb, Thuja, Rhus Tox and Lachesis. For prevention I prescribed Malandrinum (30), Vaccininum and Variolinum. As regards diet I advised milk, sago and light food during fever, not chapati or rice as administered by a renowned specialist, a Kabiraj of Bengumpore, whom I saw prescribing rice diet during high fever with delirium until the eruptions were completely out. In this way he was able to cure several cases.

In conclusion I must say that I have particularly noticed that in some cases, of course, the members of the affected houses who out of fear fled to distant places where there was no trace of this disease, were also virulently attacked even after a fortnight and at last succumbed to it. It may be, the poison somehow entered into their system during their stay at the affected places.— DAKHINARANJAN DUTTA.

---

## SMALLPOX IN CALCUTTA.

We have got a rather severe epidemic of smallpox in our city and every body is trying either to ward off its attack or to get well when down with the disease. Our municipal Health officer and Government medical officers are trying to vaccinate and re-vaccinate people whenever and wherever they get them in hand. But still the disease is making headway. Instead of exhausting so much zeal and energy in vaccinating people, if we do our best to adopt hygienic measures, clean and scavenger roads and habitations, much good may be effected. Vaccination is not an absolute preventive though it has some effect in preventing and aborting an attack in some cases.

There are bad effects of vaccination as prevailing now-a-days, there is not a shadow of doubt. We homeopaths have other means at our command, so instead of resorting to ordinary vaccination we must take some of our preventives which have in a manner the same effect but which are safer and more agreeable and without any bad after effects.

We have three remedies which are claimed as preventives of smallpox. ‘

They are *Malandrimum* from the grease of horses, *Vaccininum* from the cow-pox and *Variolinum* from the virus of the actual disease itself. They have been prepared and potentized according to homeopathic method of preparation.

First of all we take *Malandrimum*. ‘The late Dr.

Fellger of Philadelphia, probably had a more extensive experience in treating variola and the effect of vaccination than any other man of his time. He had given much thought and many years of study to the subject and came to rely almost wholly upon Malandrinum as a prophylactic for variola, and as the therapeutic remedy in acute cases. He used Malandrinum for confluent smallpox with great success. Where the skin has an unnatural color between the pustules, and smallpox takes on the confluent form, it is always serious and often dangerous. When the eyeball becomes congested and red, it enables the physician to prognose danger."

We have records of other eminent physicians and doctors of public health who also bear testimony to the efficacy of curative medicine in smallpox.

Malandrinum as a preventive and curative medicine in smallpox :—Dr. Boskavitz, of Brooklyn was the first to introduce and use Malandrinum. Drs. Raue, Carelton Smith, William Jefferson Guernsey, Selfridge, Wesselhœft of America and Drs. Burnett and Clarke of London also bear testimony to its efficacy in smallpox.

As a preventive it should not be repeated too often ; once a week or once a fortnight. It must be given in high potencies from 200 and upwards. But some are of opinion that 30th is the best potency. We also used it very frequently in this country as a preventive and curative agent. Our friend and colleague Dr. C. S. Kali spoke to me that he had an extensive

experience with this medicine. In our Calcutta Homeopathic Society, we had a very heated discussion on this subject in its last meeting. Many of our colleagues spoke highly of the use of *Malandrinum* as a preventive and curative medicine in cases of smallpox. Provings have been made with this medicine by Drs. H. C. Allen and W. Wesselhæft and the symptoms derived from them, are also corroborative evidences for *Malandrinum* as a remedy in smallpox.

Of course we have other symptoms from these provings which go to show that it is also a useful remedy in various other diseases of serious nature.

Next we have to consider *Vaccinum*.:—Of its efficacy as a preventive we have the authority of our brethren of the allopathic school. They use it in crude form and in a doubtful manner, while we potentize and use it most effectively.

Years ago we had an extensive use of this as a prophylactic and with marked success. An old friend of mine says that he gave a weekly dose of *vaccinum* 6 to many people in his neighbourhood where smallpox was prevailing then, and none had the disease. We also have used this, from a long time, with success. I was guided to commence the use of *Vaccinum* from a remark in the *Guiding Symptoms* of illustrious Hering. In an epidemic of smallpox at Philadelphia he gave this medicine to five hundred persons and none had the disease. "From Jenner, we have it that the origin of cowpox is infection of udders of cows by contact with grass, on which a horse infected with

grease has trodden ; while the other historical origin from a similar source of infection, also from Jenner, is that it was from the unwashed hands of the stable boys who milked the cows after grooming the horses infected with grease." This view is in accord with our use of Malandrinum as a preventive of smallpox.

— P. C. MAJUMDAR, M. D.

## Clinical Cases.

### Case 1.

I was called in to see the wife of Babu Durgadas Sarcar, aged 40, who had been suffering from intermittent fever off and on for two years. She had been under allopathic treatment all this while, and she came under my care on the 4th. January, 1915, with the following symptoms :

Fever generally came on in the morning ; burning sensation in hands and feet, bowels constipated. great hunger, burning pain in the stomach in the morning.

Treatment and result :

Gave Sulphur 30 four doses for two days. She got very slight fever the next morning. Placebo, six powders, for three days, completely cured the patient who had no more paroxysms and fever.

### Case II.

Babu Himangshu Shekhar Mukherji, aged 35, had been suffering from asthma for a long time. He was under Kaviraji treatment, which did him no good. He came under my treatment on the 20th. January last.

I found him a medium-sized man, somewhat lethargic in habit ; subject to attacks of acid rising with vomiting and purging. The attacks occurred after midnight. He could neither sleep nor lie down, which aggravated the paroxysm.

Gave Ars 30 ; three times a day, for four days. The paroxysm stopped at once. After four days, the patient came to me and told me he had quite got rid of the paroxysm. Since then he has been keeping excellent health.



**Case III.**

Babu Rakhal Chandra Banerji, aged 40, had been suffering from bleeding piles for a long time. He came under my care on the 10th. January, 1915, with the following symptoms :

Excessive discharge of bright red blood. subject to shooting pains and pressure on the anus ; abdomen feels too full.

Gave Sulphur 30 one mark, and the next day gave him Aconite 30, which gave him much relief. He was better for a week, though the shooting pain in the stomach came in the morning. He was then given Sulphur 30, and the bleeding and everything disappeared.

DR. T. B. MUKHERJEA.

**THE CAUSE OF SEA-SICKNESS.**

A well-known theory with regard to the reason of sea-sickness is that it is caused by the irritation of the three semi-circular canals in the inner ear which control the equilibrium of the body. It has not yet been definitely established that these three canals do actually regulate our sense of direction and equilibrium, but there is a great deal to be said in favour of the hypothesis. At any rate, the experiments bearing on this theory recently carried out by the eminent ear-surgeon, Professor Bruns, are of great practical interest. Professor Bruns tested more than one hundred persons by turning them in a revolving chair, and he now reports that the symptoms shown as a result of this operation were identical with those of sea sickness. By testing the central nervous system he was able to predict whether persons about to make a sea journey were likely or not to suffer from sea-sickness. Moreover, in collaboration with a physician, by name Dr. Fischer, he discovered that the irritation of the central nervous system could be controlled by the administration of atropin. Given as a preventive, it is claimed that atropin will ward off an attack. During the attack, on the other hand, this drug would appear to stimulate the central nervous system, and it is suggested that caffeine might then be substituted for it.—*The Statesman*.

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV. ]

APRIL 15, 1915.

[ No. 4.

---

## TUBERCULAR DIARRHŒA. \*

BY G. L. GUPTA, M. D.

Gentlemen,

I have chosen as the subject of my paper this evening, Tubercular diarrhœa—a disease we are very frequently called upon to treat and one which confronts us with many difficulties. The history of the disease, its early diagnosis, the intestinal symptoms that at first prove so deceptive because of their semblance to many other complaints of the bowels, its clinical course and the changes it sets up in the intestines, play such an important role in the successful management of this serious disease that it behoves me to discuss it from a purely clinical standpoint so as to bring it within the range of practical therapeutics.

The disease begins with irregular diarrhœa, colicky pains and moderate fever, in persons with a

---

\* A lecture delivered before the Calcutta Homeopathic Society.

history of irregular habits, indiscretion of diet and digestive troubles. The symptoms at this stage are rather deceptive as they are in common with many bowel complaints and chiefly resemble an ordinary attack of intestinal catarrh. But the one noticeable feature which should at once arrest our attention is its exhausting character. The debility is greater than the nature of the attack would warrant. It should also be noted that the patient has an abnormal appetite. At first the duration of the attack is from 3 to 4 days whether he is given treatment for it or not. The patient considers himself cured and thinks no more about it. The stools become partially formed, appetite becomes normal, but a certain weakness remains. Relapse is certain to occur and the same set of symptoms is repeated but in an exaggerated form. The stools are more frequent, the weakness more pronounced and the duration of the attack longer. Marked anæmia is developed and is a constant feature throughout the course of the disease. As the disease progresses, the relapses become more and more frequent and the symptoms more and more serious. It is then that the true nature of the disease becomes apparent. Fever is developed and the pulse becomes weak and irritable. It is not so much the fever as the irritable pulse that should be of great diagnostic value in this disease. The stools during the interval of the attacks are not necessarily thin. Neither are they exactly formed but the quantity is out of all proportion to the amount of ingesta taken. The color of the stool is seldom yellow.

It has the color and consistency of cowdung. The intervals between the attacks become gradually shortened and finally the diarrhœa is continuous. The tongue, at first red and raw, is entirely denuded of epithelium later and finally ulcerate. Gangrenous stomatitis is almost a constant feature in the last stage and partial edema is developed. As the disease tends towards its termination the stools become thinner and more numerous with an admixture of pus and blood, abdomen assumes the characteristic scaphoid form, weakness and emaciation go on apace, the patient becomes semi-comatose, urine and stool are passed involuntarily and death from asthenia takes place. Or in other cases the end comes with a sudden seizure of agonizing pain in the abdomen which becomes greatly tympanic—symptoms pointing to perforation and peritonitis. Pathological changes consist in the deposition of tubercles in the Pyer's patches, solitary glands, colon and coecum which undergo cheesy degeneration and ulcerate, and involve the greater portion of the mucous membrane of the small and large intestines. Perforation and peritonitis are common occurrences.

I will now turn to the treatment of Tubercular diarrhoea. The indictment that homeopathy can remove symptoms but the disease remains, cannot be applied with greater force in any other disease than the one under discussion. To prescribe on the outward symptoms alone with a view to stop the diarrhoea, would be as unwise as it would be deceptive. We

must bear in mind that the disease is specific, that in the earlier stage it is characterized by a quiescent period when the diarrhoea ceases and both the patient and the doctor are deluded into the belief that there is an end of the trouble while definite changes are going on in the intestinal canal and that in the later stages no so-called indicated remedy exerts any influence over the disease unless it has definite relation to the pathological process set up in the intestinal canal. It would be sheer waste of time to give Podophyllum for the early morning aggravation, Pulsatilla for the changeable diarrhoea with thirstlessness, Croton for the thin yellow stool worse from drinking and so on and wait and watch results. Remedies of this class do not correspond to the perspective of the disease, are unhomeopathic and therefore ineffective. Among the remedies which I consider most appropriate to the condition is Arsenicum and I know of no better remedy to control the intestinal flow whenever the true nature of the disease is suspected. I would even give it in the absence of burning pains, offensive stool, intense thirst and midnight aggravation. It must be given in low potency to get the desired effect. The sixth decimal dilution, repeated every 4 hours, I have found most effective. Calcarea phosphorica, Phosphorus and Iodum in equally low potency and repeated as often meet some cases. After the diarrhoea has ceased, the patient should receive the most important part of the treatment. I mean the curative treatment. Although the symptoms are removed, the true disease remains.

It would be indeed bad practice to discontinue the treatment. The condition of the intestinal mucosa left after the diarrhœa has ceased and the progressive changes set up after each relapse, when the patient has the so-called formed stool, call for special treatment. It is here that Arsenicum Iodatum finds its chief sphere and a remedy that can be looked up to with confidence. It corresponds to the condition perfectly. It should be given in the 3x potency in the form of trituration twice a day and best after a meal to avoid unpleasant symptoms, and continued through the interim. By following this piece of practice I have the satisfaction of finding the subsequent relapses becoming less and less severe until finally they cease. Tuberculinum, Psorinum, Sulphur, Lycopodium, Argentum nitricum and remedies of that class given in high potencies are found very useful as intercurrents. Of their curative virtues in this disease I am inclined to be pessimistic.

A word about diet and I finish. Since tuberculosis is a disease of nutrition, the nutrition of the patient must be kept up. The diet must be easy of assimilation and at the same time nourishing. Patients put exclusively on liquid diet for 3 to 4 weeks from the beginning of treatment, show signs of great improvement and the result is very gratifying. Lemon, whey, raw meat juice freshly prepared, egg flips when agreeable, should form the chief articles of diet and return to solid food should be very gradual and cautious.

---

## Clinical Cases.

### I. Abscess.

Abdul Gunny, an elderly Mahomedan, otherwise healthy, had an abscess in his back. It was very painful, pains aggravated at night. Very restless, could not sleep, the heat of the bed unbearable. The abscess was hard and red. Bowels regular. Slightly feverish at night.

Mercurius 200, one dose and placebo morning and evening. Reported better.

Placebo continued. Cured in a week.

### II. Colic.

Mrs. B., a young European lady, had been suffering from dyspepsia for a long time. Colicky pains in the region of the stomach ameliorated by taking food ; she wanted to eat all the time, for as soon as the stomach was empty, she got the colic. Much flatulence, more towards the morning.

Bowels generally constipated, hard balls passed with difficulty, mind depressed.

After trying some other medicine *Anacard* 200, one dose, given. The effect was marvellous. She had no more colic or flatulence and the bowels moved regularly after that.

### III. Granular lids.

Babu P. H., a youngman of robust health, had to attend office till late in the evening, coming in a tram car against wind.

Eyes inflamed, pus coming out profusely. Pus less under allopathic applications but no cure.

Eyes itching, profuse gush of water. On opening the eyes minute granules of highly red color were observed. He complained as if there were sands in the eye.

Had gonorrhoea years before which had apparently been suppressed. Urine scanty, frequent and high colored.

Hepar s., Merc. and Calc. sulph. were tried without benefit.

One dose of Thuja 200 followed by placebos cured him.

#### IV.

Mrs.—B., aged 40, robust and fat, suffered off and on from a "*nasty skin disease*" and applied all sorts of things without benefit, sometimes eruptions disappeared but came back again. These are her own words.

I saw she had bad eczema of leg and foot, right side was most affected, some on the left side also. The skin around the parts was hard and there was a number of scales coming out.

Some eruptions were still visible from which sticky yellowish discharge took place. These dried up followed by fresh ones. The itching was horrible, especially at night and after walking. Bowels obstinately constipated. Hard, dried balls passed with considerable difficulty. She was otherwise healthy. There were some cracks from which blood oozed out.



Graphites 1 m., one dose, followed by a dose of placebo every morning.

In two weeks she was much improved. She was glad that her bowels which were never free were now all right.

In a month she got rid of the eczema.

## V.

Azezur Solomon, a young man, had a strong attack of diarrhœa on the 16th of January, 1915.

Stools yellow, watery and gushing. Colic before the stools followed by relief.\*

Considerable flatulence, passing up and down, did not give him much relief.

Aggravation of diarrhœa towards the morning.

Slight nausea, no vomiting. The patient became weak.

Natrum sulph 30, one dose, morning and evening. In four days he was much improved. In another week he was all right. Only eight doses of the medicine were taken.

## VI.

Mr. R., an Eurasian gentleman, had strong fever attended with pain over the whole body and great restlessness. Tossing about in bed ; great thirst drinking very cold water every ½ hour or so. Suffering from protruding piles which were very painful, but pressure on the piles gave him temporary relief. Had a dread that it would turn to a typhoid fever.

Bowels constipated, no appetite, tongue red and dry.

Rhus tox 30, three times a day. Much better the next day. The medicine continued. Cured.

7. M. E., a baby ten months old, had very harrassing cough about 5 days.

Cough almost dry, after a prolonged effort a small quantity of thin viscid phlegm came out.

Aggravation at night, especially in the midnight.

Paroxysms coming on one after another in quick succession causing difficulty in breathing. Perspiration came out from the effort of coughing.

Drosera 6x, three times a day, cured her in a week.

P. C. MAJUMDAR, M. D.

## “UNITED WE STAND AND DIVIDED WE FALL.”

The report of the newly formed sub-committee of the Calcutta Homeopathic Society, delivered from the Dhurumtolla post office on the 15th of August, 1814, duly reached me next day the 16th of August at 10 A. M. The report should have been distributed a little earlier when the sub-committee had been formed on the 24th of July with instructions to members for submitting their opinions within a fortnight *positively*. Of course we members are to understand by this fortnight that it would be counted from the date of receipt, otherwise it is almost impossible to give opinions and

independent views on an important question like this within a short time.

May I, as one of the registered humble members of the Homeopathic Society, ask when and by whom had the sub-committee been formed? When any important business should be transacted, it should be brought to the notice of each member and the sub-committee should have been formed according to the opinion of all the members. Most probably it has been formed only by the few American graduates and so its views are palpably selfish and one-sided.

The future of the Homeopathic fraternity will depend much on our joint efforts, for united we stand and divided we fall. The purport and meaning of the above line is very pleasing at first sight but our American colleagues seem not to understand the meaning of the union. They mean by *union* only an union among a few American graduates, otherwise why are they so eager to snap the common friendly ties of all the members by dividing the Society into two sections just like the Hindu and Mahomedan communities and set one against another. Please allow me to ask candidly who is the superior and who is the inferior of the two. The Hindu will surely try to preserve his dignity and the Mahomedan would say quite the contrary. Who could condescend to drop down his head before the other. As a natural consequence instead of being united (which is the sole aim of the committee) our power will be weakened and the ultimate result will be the total annihilation and complete extinction of the society,

which had been formed long before the advent of our friends from abroad and it would cease to exist ere long. In my humble opinion it is better and ~~more~~ advisable for them to stop for the present at least to attempt to assert their superiority over the graduates of the Calcutta *Homeopathic* Colleges. If they are actually superior and more qualified than their Indian compeers, they will ever be so. Their services to the public will positively prove that. Burning fire cannot remain smouldering for all time. The sun, the moon and the stars will always shine and shed their rays whenever clouds vanish. Diamond and gold will ever glitter whenever they are washed.

Their brilliant intelligence and deserving merit will be appreciated whenever they get opportunities. None can stand against this natural law. But what advantage would they derive by taking a drum on their back and striking against it vehemently, to let the public know that they are superior to Indian homeopaths, I mean those who have passed out of Homeopathic colleges if they are to be so called.

When our American colleagues find that they cannot expect that their services will be recognised by the Government, by adopting the above course, why do they bother their heads for dividing the members of the society. It is not possible to say that all the graduates from the American institutions are of a superior calibre to their Indian brethren. It may be, some of them are more intelligent and learned than their brothers, but I can boldly say, not all. Nay, I can mention the name

of some Indian Homeopaths who are in no way less qualified or less meritorious than the American graduates, but superior to them in many respects. It does not follow that no sooner they touch the British soil than they are masters of all, and their education is perfect and their position unique, exalted and incomparable. It may appear at first sight that in some respects their position is desirable and enviable, such as in style of living, fluent speaking, cigarette smoking, &c., but not necessarily in education, practical training and in the practical field, but they have to suffer many hardships and pinching wants to preserve their style even sometimes at the cost of their paternal estates and personal comforts. Now I shall try to show from the examples of men educated in British soil that they cannot outbid their eastern compeers. Look at the other walks of life, the legal profession, &c. Are Dr. Rash Behari Ghose, Justice Dwarka Nath Mitra, late Dr. Trailokya Nath Mitra, Eshan Chandra Mitra of Hughli, Baikunta Nath Sen of Berhampore and many others though educated in India in any way inferior to the barristers? If you take the example of allopathic practitioners—are Drs. Juggabundhu Bose, Karuna K. Sen, Suresh Chandra Bhattacharyya, Suresh Chandra Sarbadhicary, Nilratan Sirkar, P. D. Bose and many others in any way inferior to any passed graduates of British universities who happen to be crowned with degrees from A to Z. Almost in every branch of learning from lawyers to the circuswallas and jugglers, I can show that Indian training however imperfect and incomplete, has turned out,

some of the best intellects of whom any country and nation would be proud. The Bengalees with their keen intelligence and quickness of penetration can hold their own against any one educated in western countries. You may say that the above lawyers and doctors were thoroughly educated in recognised Government colleges though in India. We, the Indian homeopaths, are not so much cultured, our schools and colleges are in an embryonic state and not recognized by Government and so our education is not perfect and we cannot be expected to stand on an equal footing with our American colleagues. In reply to this I must say that homeopathy was discovered by Samuel Hahnemann only 100 years ago. Truth is always truth and though not recognised by the Government, it has extended over the whole civilized world within a short time like the flash of lightning and achieved splendid results.

It was introduced into India in the middle of the nineteenth century. In comparison with the date of its discovery its progress in this country is not very unsatisfactory.

Even before the arrival of our American brethren the names of renowned homeopaths like Dr. Rajendra Dutta, the pioneer, Dr. B. L. Bhaduri, Dr. Salzer, Dr. Sircar, Dr. Majumdar, were not unknown to the public. Since then a few ex-students of the Medical College and under-graduates had been trying their best to learn the Homeopathic principles sitting at their feet. In order to remove their inconvenience and satisfy their eager desire, the renowned and kind-

hearted Dr. P. C. Majumdar was the first to conceive the idea of establishing a Homeopathic school in Bengal. The school was started on a very small scale in the Calcutta Training Academy building, which was then guided by Dr. P. C. Majumdar, Dr. Salzer, Dr. B. L. Bose, and A. C. Kasthagiri. Dr. Majumdar had to suffer much for his noble object. He argued and tried his best to make his hearers understand what he was about. He explained to them in plain terms that every noble object would have a small beginning. What was the condition of the Medical College at its commencement? It is said that a salute was fired when Madhu Sudan Gupta touched the dissecting knife. Rome was not built in a day. Who anticipated that the small seed sown by Samuel Hahnemann would in course of time grow into a mighty tree and its far-extending branches overlap the whole world and thus be a source of inspiration to many in every land. The name of the noble founder of Homeopathy would be effaced from the pages of Indian history had not Dr. Majumdar come forward as its sturdy champion at a time of stress and difficulty and helped forward the cause with untiring zeal and unabated industry. Now let me speak a few words more about the Indian Homeopaths. Though their education may be imperfect in some respects, some of them have improved beyond expectation through self-culture and self-exertion. They are in no way inferior to our American friends. They are under-graduates properly educated, have got extensive practice and their services are highly appreciated by .

the public. They are doing immense good from the centre of the capital to the most insignificant hamlet in Bengal. Though they are not well equipped like our other colleagues, their work cannot be depreciated or minimised. In conclusion, I beg to say a few words about the emphasised word *laymen*. Who are the laymen and what do we understand by it? If it means men whose education is not approved by Government, then neither our American graduates nor Indians are recognised by the state. In the eyes of Government the diplomas held by both have an equal value, in other words no value at all. If laymen means uneducated men, who have no perfect knowledge of the science—even in that case I challenge in saying that no medical man, however educated he may be, whatever advance he may have made in the science, can be called perfect.

Medical science is so complicated and difficult that it cannot be mastered by any one fully. Therefore the Hindu physicians are of opinion that it is beyond the scope of the human brain.

God Mahadev is its promulgator. I have tried my best to make our American colleagues understand by citing examples that they cannot claim any superiority over Indians. If my friends from America lose their temper and be excited, they know that I am an insignificant man in comparison with the best Homeopathic practitioners of Calcutta and I admit I cannot venture to approach them as I never crossed the Bay of Bengal; still I have the presumption to stand on an equal footing with them in the



practical field. In the course of my practice I came in contact with some of the pillars of homeopathy like Drs. Salzer, Sircar, B. L. Bhaduri, P. C. Majumdar, B. N. Banerjea and others. If the motto of the founder be "The knowledge of disease, the knowledge of remedies, and the knowledge of their employment constitute medicine," then why should our Indian fellow practitioners be ignored? If they do so without any reasonable ground, they should bear in mind that they are in the same category. They are looked down upon by the graduates of the Medical College of Calcutta.

When all practitioners are cast in a similar mould, is it right to set one against another and divide the house against itself? Is it at all right and proper to arrogate to one's self all knowledge because one hails from foreign lands and looks down upon a brother who is born and bred in Bengal. A house divided against itself cannot stand and it is necessary therefore, if the best interests of the society are to be served, to sink our petty differences and stand shoulder to shoulder for a common cause. Let us then be up and doing and gird up our loins and do our best to avoid recrimination and strife and steer clear of those petty squabbles that disfigure our proceedings and plant the sacred olive branch.

I have myself heard remarks passed by the best homeopathic practitioners of Calcutta who are graduates of the Medical College that American graduates hesitate to mix with Indian homeopaths but they are

quite blind to their own drawbacks and position. Every one should forgive and forget the faults of others and not vent one's spleen upon his fellowmen. In the best interests of the society and the larger stakes of the country it is desirable that recrimination and strife should cease and concord and good-will prevail among all members. Thus will old sores be healed and a brighter future will dawn upon our society and we shall be able to march hand in hand to the promised land of success.

\* \* Although I am an American graduate myself, I fully endorse the views expressed by our respected colleague.—E. D., I. H. R.

D. R. Dutt.

## HOMEOPATHY IN MALARIAL FEVERS.

It is a matter of regret that the general public are still under the impression that Homeopathy is not successful in fever cases. Our Allopathic brethren too talk big about the inability of Homeopathic drugs to fight malarial fever, and of the marvellous efficacy of Quinine under all conditions and circumstances.

This sort of prejudice does a great deal of harm to the public, and every Homeopath should try his best to dispel this false idea from the mind of people, to whom this false impression means a lot of suffering that might have been avoided. One such eye-opener will do a deal of good to the people, and to the science, for there is no doubt that the mistaken idea has set a

check on the progress of Homeopathy in India. I am going to place before the public my own experience in 253 important fever cases, which were effectively cured by a few doses of Homeopathic medicines. In most of these cases, Allopathic and even Kaviraji treatment, given a fairly long trial, had failed miserably. Many of them had taken huge quantities of quinine, raw or in a mixture. The aforesaid cases were treated by me during the period from January 1st, to March 15th.

I noticed the following general symptoms. The patients had high fever, temperature being highest just before noon. Chill stage prolonged and painful. Bad headache lasting all day long ; great thirst, nausea, sometimes vomiting ; enlarged spleen and liver ; sensation of great heat after the chilly stage, headache and thirst becoming worst ; then came perspiration and with it, the pains disappeared, with the exception of the headache, as noticed above ; tongue coated yellowish white, and having a salty taste ; weakened appetite ; bowels constipated.

In nearly all these 253 cases, I gave *Natrum mur* 30, and cured most of the patients. Those who suffered from enlarged spleen and liver, had to use the medicine for about a fortnight, while the others used it for a shorter time, three times a day. Generally, the fever was checked the first day the medicine was administered.

The patients came to me, when other methods of treatment held out no relief for them. They could have suffered much less had they not been

victims to that popular prejudice against Homeopathy in fevers. I am glad to note that they acknowledge it and thank me for pointing out, nay proving, that they had been mistaken.

DR. T. B. MUKHERJI,  
Labpur, Birbhum.

---

### News and Notes.

*Calcutta Homeopathic Society.*—The annual meeting of this society took place in the Hospital building. The learned President Dr. Sircar in a neat little speech thanked the members of the society. Dr. P. C. Majumdar on behalf of the members thanked him and the office-bearers for their untiring zeal and energy in the discharge of their duty for the last two sessions of the society.

Then the following officers were elected :—

President.—Dr. P. C. Majumdar, M. D.

First vice-president—Dr. S. Goswami, M. D.

Second vice-president—Dr. S. K. Nag, M. D.

Secretary—Dr. D. N. Banerji, M. D. & L. M.

Assitant Secretaries—Drs. Bolye Lal Dutt and M. N. Ghose.

*Dr. Süß-Hahnemann.*—We regret very much to learn the death of Dr. Suss-Hahnemann, a grand son of our master Dr. Samuel Hahnemann. He practised in England for a considerable period and though not very well known to the outside world as it should have been, was yet widely respected and beloved by our English' confreres.

*The wretched War.*—The big European war, that has been raging since August last, has done much mischief in everything for the present. But there is nothing in the world of unmixed evil. Our colleagues in the homeopathic profession in England are doing their duty in treating the wounded soldiers at the front. We take the following news from the "Homeopathic World" :—

"As our readers know Mr. Dudley Wright, with Dr. Hare, Dr. Leuin and Dr. Cunningham, has been in charge of a hospital at Dieppe for the French wounded. So successful have they been that they have now exchanged their original hospital of sixty beds for a Government hospital at present for four hundred beds. This is magnificent testimony of the excellence of their work."

Some young physicians and surgeons from India, both from the covenanted Indian Medical Service and from the private practitioners, have gone to England to take charge of the wounded at the front. But no homeopath was selected.

---

## SMALLPOX.

### VARIOLA.

Smallpox is a loathsome disease. It causes great numbers of death in every epidemic. It also produces disfigurement and often blindness ; so we must be on

our guard to prevent it and when it occurs to cure it by simple and effective means.

In our last issue we spoke of some remedies as preventives and now we mention the most important one as a prophylactic and curative, I mean *Variolinum*.

Dr. Carleton says "Vaccinum, Malandrinum and Variolinum, in potency given by the mouth produce less disgusting results than do their crude bases applied beneath the skin. Of these three, Variolinum alone is capable of producing immunity from variola, and, therefore, should be the chosen agent, if variolation in any form is to be done."

We have the great authority of Constantine Hering on this point and it is certainly reliable. We quote symptoms and cases from his "Guiding Symptoms." Proving were made by Drs. Lenan and Fincke.

A child, aged 8 months, received a drop of lymph from a healthy vaccination, diluted with one hundred drops of distilled water, and well shaken. On the fourth day small bright red pimples appeared on the face, which on the following day formed vesicles of a pearly look, with depressed tips, and surrounded by red ariolæ. On the 8th day the patient was very restless, screamed and cried, and wished to be carried constantly ; sleeplessness, febrile heat, rapid pulse, thirst, desire to nurse constantly without taking much ; constipation, high colored urine ; pocks elastic, tense, hard, pearly ; inflamed redness and swelling of face.

On the tenth day, on forehead and nose pocks

became confluent, looked turbid, were filled with purulent liquid, and somewhat shrivelled.

On the eleventh day pustules burst and discharged purulent matter which formed yellowish brown scales, which afterwards became dark ; these suppurated and exuded for a long time, gradually healed in about fourteen days. Subsequent repeated 'vaccinations at six months' intervals were ineffectual.

This is true internal vaccination as we call it in homeopathic practice. Variolinum produces the same array of symptoms but in graver intensity. Dr. Swan related a case in whom there was very severe pain in the back, body completely covered with large pustules, temperature was 105 F. *Variolinum* cm., one dose dry on the tongue, made a good recovery.

Another case with severe chill followed by high fever ; severe pains in the back, as if broken ; pain all over the head ; frequent bilious vomiting, thick, dirty yellowish coating on the tongue, wild delirium and spasms night before eruptions appeared ; on the third day smallpox pustules, soon assuming confluent form. *Variolinum* cm. cured.

Dr. Morrison says that *Vaccinium* 6 in water for one day with strict diet, repeated after eight days, was preventive in six hundred cases. In the year 1898 I used *Vaccinium* 6 in weekly repeated doses for numerous cases and prevention was obtained.

*Variolinum* given in the disease often cuts short the duration nearly half or one third the time, and the suffering of the patient is much mitigated, secondary

fever is either absent or very much lighter, pustules do not burst, but wither or melt and fall off.

In subsequent epidemics I used *Variolinum* as a prophylactic and the result was marvellous. Preventive virtues of *Variolinum* were tested by some friends of mine, some of whom expressed their experience in the last meeting of the Calcutta Homeopathic Society. From their collective evidence we make bold to say that *Variolinum* is a true preventive as well as a perfect curative agent in smallpox.

I have used it in all stages and conditions of the patient with very good result.

We quote here what Dr. William Jefferson Guernsey of Philadelphia says about vaccination.

"Vaccination is usually recommended as the best prophylactic from variola, but there are many strong and reasonable objections to it. Further more it is no surer protection than a primary attack of the disease, which every one knows to be a fallible rule. Vaccination even with the best virus attainable, is frequently accompanied by provokingly severe and long lasting affections. As a substitute for this barbarous remedy, *Variolinum* and *Vaccininum* have been recommended ; but better than these, and surer than all is *Malandrinum*, a potentized preparation of the morbid product of the "grease" of the horse (better called *Greasinum* for malanders is a slightly different affection). It produces an exact similitude to smallpox, and is without doubt the best protection against the disease. Dr. Herman Boskswitz of Brooklyn, and



**Drs. Raue and Stroube**, of Philadelphia, have made quite a study of this subject and have reported no failures. *Malandrinum* has been given to numbers of unvaccinated children who were directly exposed to the contagion of variola, and they have invariably escaped the disease. The writer has given the remedy to many persons (one dose each), directly after vaccination and been unable to make that or revaccination "take" with virus which had proven effectual with others who had not had the medicine. One girl, who suffered terribly from pain and an enormously swollen and inflamed arm and forearm, following vaccination, I entirely relieved of the pain in a few hours by two doses of *Malandrinum*, and with an almost complete disappearance of the objective symptoms in twelve hours. Two doses of *Malandrinum* 30, given twenty four hours apart, will answer for at least one season. If the disease appears again the following year, it may be renewed. It is better for the satisfaction of the patient to follow the two doses with *Sac. Lac.*, enough to last the balance of a week, or, perhaps, given several powders of the medicine."

This is what the renowned Dr. Guernsey has said in his lectures on smallpox at the International Hahnemannian Association meeting. We have also verified the efficacy of *Malandrinum* as a protective and curative medicine in several smallpox epidemics in Calcutta. Besides these, other reputed physicians in different parts of the world suggested medicines as prophylactic and curative in smallpox. For instance, the

grand old Bænninghausen recommended *Thuja* as a prophylactic ; Kaczhowsky allowed a dose of *Sulphur*, to act for fourteen days, followed by *Vaccininum* or *Variolinum*. Others suggested *Baptisia* and *Saracinia*. This latter medicine had been tried by us in an epidemic of smallpox in Calcutta long ago and with decided success.

P. C. M.

---

## GLEANINGS FROM PRACTICE IN MUFFASSIL.

The evolution of the world from barbarism to civilization has ever been marked by breaking away from long established customs which have almost invariably had their beginning in ignorance.

Centuries ago the priests and wonder-workers by reason of their superior intelligence held sway over their fellowmen—the masses. Partly because of their wisdom and learning and partly because of craft and cunning their hold upon these masses was strong indeed. By their shrewd understanding and reading human nature as an open book they played upon humanity's superstition which catered to its love of the mysterious. Elaborate ceremonies, chiefly being religious, because religion and medicine were closely allied in those days, the office of priest and physician often being combined, were practised in the treatment of bodily as well as mental ailments. The human body has always been a fascinating subject for

study. It is a wonderful piece of mechanism—a beautiful specimen of artistic work and a marvel of matter animated by intelligence. Primitive man started this study in total ignorance and it is not to be wondered at that he made many errors and thereby did incalculable harm and led others in the wrong paths with him. But as century followed century, more light was vouchsafed until today a better understanding is secured than ever before. But it is only recently that with the advancement of western science the people are getting more theoretical than practical or rather becoming more chimerical about drug action. Physicians at best blind leaders of the blind preferred to mystify their patients by Latin names and long formulæ, to frighten by grave looks, to impress by mysterious examinations and elaborate by-play. Would not the majority of the patients more willingly give a liberal fee to get rid of an ailment than to have a name of seven syllables utterly unpronounceable for it. Look at the fair specimen of a patient and a doctor—of course I mean a licence-holder legally authorised by the Government to administer drugs with a vaunted knowledge of anatomy and physiology. As soon as a patient steps in with a feeling of disturbance within, a mixture of ill-feelings which he feels but can scarcely describe—a pain here, a twitching there, bloating and uneasy, a complete break down of the nervous system, *Neurasthenia* or nervous prostration it may be called, the doctor at first takes a bird's eye view of him whether he is paying or not and then begins a closer

examination ; he pounds him in various portions of his anatomy, asks some questions, looks at his tongue, feels his pulse, whips out his thermometer and takes the temperature &c ; then he impresses upon the luckless patient that he is in a very serious condition indeed ; without making a single enquiry as to the history of the man's case further than to listen to the symptoms then present, he blurts out *Chronic Malaria*. "You have got the old fashioned malaria, my young fellow and I shall have to give you some large doses of quinine" Then he writes a prescription of a very luxuriant growth (provided he has got his own pharmacy), of ill tasting mixture and charges a generous sum for his services and the prices of medicines are to be determined and charged by his underlings who are specially dictated to look to the cash payment. Perhaps I am unduly emphasizing this side of the picture both of a patient and a doctor. I would not have you believe that all physicians are like this, for they are not, but my experience is animated so far amongst those practising in the moffassil outside the metropolis. What a cruel mistake, if mistake it was. Nothing could have been worse for such a patient than quinine. Already the poor trembling, hysterical fellow with a complete break down of the nervous system, was suffering from the very condition which quinine had produced. -

Nerves straitened to their highest tension, brain congested almost to bursting, stock of vitality drained nearly to the last drop and then such a patient was

compelled to swallow ten grains of quinine every two or three hours.

If the vaunted physician does not know anything better than quinine as all curing agent, he should have been confined to the idiotic asylum to keep him from doing any more damage. If he does not know better than to commit such a blunder through carelessness or haste or a desire to protract the illness of his patient which is generally happening, he ought to be horse-whipped on the public street.

Alas, Bengal, nay the whole of India, is looked upon as the nursery of malaria, which gives an unbridled scope for hap-hazard diagnosis which no body would care to differ from even where no trace of malaria exists. As ill luck would have it, such circumstance arises from the mere fact that the patient happens to belong to some malarious district of Bengal. Oft and often we come across with this sort of doctors who are legally licensed to practise anything and everything without caring at all whether the patient gets well or succumb to his ailments, simply to suit the taste of the public. This sort of treatment of human ailments ought not to be censured only but demands its abandonment.

DR. I. B. SANYAL,  
Kushtea.

---

## MIGRAINE AND ITS TREATMENT.

BY DR. LEON VANNIER.

Migraine is characterized by a *continuous* or *periodic* headache, generally associated with troubles of a reflex,—that is, of gastric, uterine, etc., origin,—but always of *toxic cause*.

The forms of migraine are numerous. One person will complain of a pain in the nape of the neck; another suffers in the right temple; a third has neuralgia under the right orbit, and says it recurs every seventh day; still another affirms the steady presence of heaviness in the frontal region. Some patients are able to still follow their daily occupation; the majority of them, however, feel compelled to take refuge in bed and in complete obscurity. One might say, "As many modalities of migraine as patients"; and God knows how many people suffer from this trouble and apply for relief or cure!

The diagnosis of "migraine" is usually readily made and the treatment promptly instituted—Antipyrin, Pyramidon, Eurythmin, etc. There are many analgesic preparations which give certain relief, but whose curative efficacy is very doubtful, since their temporary action hardly ever prevents the recurrence of the same phenomenon.

Let us reflect a bit. Migraine varies with each patient; it constitutes a kind of *individual reaction* that one must study in order to know the pains, characteristics, degree of acuteness, the irradiations, the modalities, etc. All of those elements are necessary to determine not only the form of migraine, but also the homeopathically corresponding remedy.

Let us take two examples:

Patient complains of *chronic headache*, beginning with the getting out of bed; worse at about 10 A. M., with the sensation as if little hammers were hitting the skull; intense thirst and vertigo, with sparks before the eyes. Will you not think at once of *Natrum muriaticum*?

Another suffers from persistent pain on top of head, with sensa-

tion of fullness and heaviness in the temples. *Periodical* headache, vertigo ; fainting spell at 11 A. M. ; patient cannot remain erect very long ; diarrhœa in the morning, compelling him to jump out of bed at 5 A. M. The pathogenetic signs of Sulphur.

But in order to determine the indicated homeopathic remedy it is necessary to know the form of the migraine ; if you wish to cure the patient, it is indispensable to determine the *cause* of the headache.

Every migraine, permanent or periodic, varies with the strength of the inciting intoxication. If the *migraine is continuous*, it is proof of the presence in the blood of some toxic substances which act directly or at a distance, provoking troubles of circulation. If *periodic*, it is the manifestation of a sort of discharge or checked elimination upon the nervous system of toxins progressively accumulated in the organism.

What is the nature of this intoxication ? Varying with the patient, it may be *autogenous*, *tuberculosis* or *syphilitic*.

#### INDIFFERENT HEMICRANIA.

**IGNATIA :** Sensation as if nail was driven through the head (clavus) ; better in dorsal decubitus. Headaches caused by *mental effort, emotion, violent odors*, etc. Crisis ends with vomiting. A good sign for Ignatia when cephalalgia recurs every two days. Sometimes the Ignatia headache has pulslike character ; pulsation worse in the eyes, around the eyelashes and at the root of the nose ; momentarily better by changing the position of the head and by inclining forward. Crisis terminates with the abundant passage of liquid urine. Relief then follows.

**NUX VOMICA :** Indicated in lancinating and pressing hemicrania. Begins early, progresses gradually until the patient is enraged with the pain. Face is congested and often pale. Vertigo worse in the morning, in open air, in light, noise, from coffee and eating. Migraine, after too great mental work, begins in the morning, increases by degrees and decreases toward evening, with people of sedentary habits.

## HEMICRANIA OF RIGHT SIDE.

**IRIS :** Attack begins *in the right side*, preceded by *spots* appearing *before the eyes*. Disgust and vomiting very intense. Vomiting bitter and sour. Iris eases the pain, and also the vomiting. Dr. Biegler writes that Iris *never fails* to cure a case of migraine preceded by spots before the eyes.\* Iris is suitable for gastro-hepatic migraines, and for that apparently periodical kind called "*Saturday migraine*." When the migraine is at its height bitter and sour vomiting appears. Migraine from mental exhaustion aggravated by rest, ameliorated by moderate and continuous motion. Particularly attacks students and professors.

**PLATINA :** Attacks oftener on the right side. Constriction at level of the forehead and temple on right side. More frequent in the evening. Worse when resting upon the left side. Better in the fresh air.

**PULSATILLA :** Right side—frontal or infraorbital—beginning in the right temple, along with tears in the eye of the same side, nausea, vomiting ; worse from mental exertion, heat and in the evening. Better in the fresh air, from cold and at night.

**SANGUINARIA :** Congestion to the head, fainting, nausea and vomiting. *Temporal veins distended*. Pain begins in the occiput and fixes itself in the *right eye*. Worse—noise, odors, light. Ameliorated—darkness, by pressing the head hard against the pillow. If cephalalgia is very intense, the patient may become delirious at intervals. Termination of crisis—abundant flow of urine. Menstrual migraine, with abundant flow. Hemicrania of the menopause.

**SILICEA :** Headache from waste of nervous energy. Pains come from back to the infraorbital region of the right side ; from the occiput to the eyeball, which is very painful. Worse from mental exertion. Better from heat, but not from pressure, nausea, vomiting.

## LEFT HEMICRANIA.

**ONOSMODIUM :** Headache from fatiguing the eyes and sexual

---

\* *North American Journal of Homeopathy* for February, 1875.



excesses. Worse on the left side. The head is heavy and very dizzy. Pain goes from occiput to frontal region. Pain in left side of head and *upon* left eye ; always worse when lying down.

SELENIUM : Best antidote for the effects of the abuse of tea. Migraine of the left eye. Worse from sunlight and strong odors. Periodical, occurring every afternoon.

SEPIA : Arthritic headache ; worse in the morning. Urine with uric acid. Hemisrania of leucophlegmatic and anæmic persons. *Lancinating pain in left eye, in occiput and neck.* Very intense, tearing pains. Pulsating headache in cerebellum, beginning on awaking in the morning. Any exciting cause makes it worse. Hysterical sweats. Special and non-odorous transpiration in armpits and on soles of feet is an excellent symptom, according to Hughes. Great loss of hair in chronic cases.

SPIGELIA : Headache with the rising of the sun, increasing until noon ; decreasing then until evening. Pain in frontal and temporal bones, with *sharp pain upon the left eye.* Worse from touch, motion, noise, storm, false step. Better from pressure, lying on right side with head erect.

Homœopathy is not a school of recipes. It<sup>n</sup> cannot give you a cure all for all cases of migraine. There are just as many reactions and different treatments as there are patients. The homœopathic physician must make two diagnoses—one clinical, common to all methods and necessary in all therapeutics ; the second medicinal, obliging the practitioner to collect, with the most minute attention, all the elements the patient will bring.

*To every morbid picture there corresponds a medicinal picture.* The selection of the remedy can only be made when the doctor knows the homeopathic materia medica thoroughly.

—*The Medical Advance.*

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV.]

MAY 15, 1915.

[ No. 5.

---

## HOMEOPATHY AND SEROLOGY AND IMMUNISATION.

Serology and immunisation are playing such important parts in the study and treatment of diseases that it behoves us homeopaths, to see what benefit we are deriving from the study of these subjects. Professor Sir. A. E. Wright observes that in the future of his expectation, the physician will be an immunisor. He further says :—I conceive that the task of making, by bacteriological methods, a direct or inferential diagnosis of the nature of the patient's infection, the task of preparing and standardizing special vaccines, the task of controlling the output of protective substances by blood examinations and the direction of immunisation procedures, where blood examinations are necessary as a guide, will all fall upon his shoulders. ... Upon the general practitioner, when he shall have been trained in the physiology of

immunisation, as he is now trained in the physiology of the circulatory system or the digestive system, will devolve, I take it, all such therapeutic immunisation, whether it be in the shape of vaccine therapy or auto-inoculation, as it shall prove practicable to reduce to a system of routine, or to conduct under the control of the clinical symptoms.

And upon the general practitioner, or as the case may be upon the surgeon, will devolve the task of directing such anti-bacterial agencies as may be available in a patient's blood to the destruction of microbes in the local focus of infection. When the surgeon comes to regard it as his function in connection with bacterial infections to minister to immunisation, he will not, in the case where he has to deal with infiltrated and infected tissues, stop short at mere incision and drainage but will work to secure that free lymph flow through the focus of infection which is essential to immunisation. In like manner, when he has to deal with a suppurating focus, he will not rest satisfied with evacuating the pent-up pus, but will recognise that such evacuation contributes to the extinction of the infection only in such measure as it serves to bring the anti-bacterial agencies of the blood into effective operation upon the pathogenetic microbes. And again where the surgeon has to deal with a wound which refuses to heal, or with a wound which is pouring out day by day a wholly ineffective pus, he will realise that what is required in such a case is an increase of the anti-bacterial power of the blood and a more effective lymph

flow such as would bring the anti-bacterial agents of the blood into active operation upon the infecting microbes.

Thus we see that in the treatment, nay even in the diagnosis and prophylaxis of diseases, serums and vaccines are going to play the most important part in the future. But I am afraid that the efforts of these men will not be crowned with such success until they have a therapeutic law to guide them.

Vaccines and serums as you all know are animal products, and they are no doubt useful in their own way and are analogous to our nosodes, and it is well-known what an important part nosodes play in our therapeutics. But the medicines of our materia medica are derived from three kingdoms, namely the animal, the vegetable and the mineral ; so that we can hardly say that the nosodes are all sufficient for the treatment of any and every disease. At the back of all this we have a therapeutic law to guide us.

The law of similars is an immutable law of nature • and until and unless we accept this we can never be masters of the situation. The utility of this law has been to a certain extent conceived by our friends of the other school. Auto-vaccines are being extensively used by many of the leading physicians today.

The material side has been very well developed by the members of the dominant school. But our friends forget that it is not truthful to assert that this law of cure dwells in material provinces only but that it has originated and lives in the immaterial psychological sensorium of the Universe ; and that it, *per se*, is

related conservatively to the whole of the vital tenantry of nature.

It follows from this proposition, that the material department of nature absorbs all of its support from the immaterial department of the Universe, and that when we give this fact legitimate consideration we shall find that it opens up a limitless fund of invaluable truth.

In this duality, of tenant and house—in our work of cure—we do not appeal to the “house beautiful” but to the living Cæsar tenant, from whom the house or corporeal castle absorbs its support.

Hence it follows, that the mind must be consulted in the cure of all of the diseases of the body, and that the healing power of nature is always dispensed dynamically, reactively, and absorbently from the psychological sphere of the human organism ; or, in other words, from the immaterial living, incarnating, nutritive growth force—the intelligent architect of the corporeal house.

Now, in diseased states and conditions of the body, it is the office of the physician to assist this vital dynamic tenantry in the adjustment of its absorptive, physiological environment. He can never do this, if he does not conform to the dual behests of natural law. Certainly, if he does this, he shall *live* ; and his patient shall have all possible opportunity to recover, allowing the case to be what it may be. He then shall have no cause to lament over “fatal errors,” for he has been vigilant and able in providing a due environment by the best known homeopathic

resources, based upon a correct interpretation of natural laws of affinitive, absorptive likes which he has found pictured in his cases—but not at all, in any diagnostic name of a disease—which latter means no more than to give soot tea for colic because the days of yore said it was good for doubling up, or, as when the boy said : “Doctor, I am sick all over, daub your medicine on anywhere, you can’t miss it.”

Seriously, then, we are daily taught the hard fact that we must meet the natural remedial correspondence of the cases which are committed to our charge.

If we fall short of this, we are not as well versed in true and pure homeopathic science as we should be. We shall be disappointed. Nature’s demands for her remedial similitudes, her corresponding “likes,” are inexorable. Sanative, absorbent, dynamical reaction, is pivotal. It turns to the right when the simillimum is given to the left (wrong) always without abatement and mercy, when it is not discerned, and given. Apparent miracles of success often proceed from the use of a truly corresponding remedy—miracles of shameful blunder and disaster (which should seem unpardonable) hover over the dark way of the ignorant prescriber—and the tears and anguish of the widow, and the wail of the orphan follow in the wake of—“all was done which could be done.” (?)

Placing ourselves as we do, squarely upon the platform of Nature, we proclaim her vital dynamical absorbent attributes and in therapy we recognize her vital, reactive dispensations, in the sense relatively

and physiologically, by which from the federacy of a divine league of affinitive and nutritive juxtaposites, and elective correspondences, the oak is grown and reared from its acorn germ.

The oak is a habitant of a world-wide domain, and is representative only of the character, individuality and peculiar temperament of its species, one only in a community of species the diversified nature as to peculiarity and individuality is endless, and embracing every natural substance, and which we further find epitomized absorbently in that microscopic universe called man.

If we would, therefore, we cannot escape from this infinite range of environment by which our dual existence is supported by the absorption of correlative likes and elementary correspondences, their continued rhythm and physiological psychology furnishing the absorptive bonds which bind mind to matter.

Our work consists in so understanding and in so manipulating the legitimate fruits of these facts of firm foundation, as to be qualified in our efforts successfully to repair and strengthen the absorptive bonds which connect mind (the man) to matter. Samuel Hahnemann, in his immortal *Organon*, has pointed out the way in which this can be, and is, accomplished. The *modus operandi* is established upon philosophical grounds. The whole method of procedure is shown, proven and abundantly verified and demonstrated. It is alive with the immortality of indestructible truth, and the best that we can do, is to steadfastly work our

way up to the supreme eminence of the truths which the legal statutes of Nature endorse and own.

There can be no more noble work than this, and no work which can so richly bless the bestower and them who receive. It is the glory of our cause that in thousands and thousands of truthful examples it has raised up the sufferer to newness of health and life, and we continue on doing over and over the same thing, as the law directs.

Fellow workers, let us continue to be up and doing. Let us always thank the Great First Cause and take courage. How beautiful, how symmetrical, how sublime is the way and the means which God in his ordinances and handiwork has given us to do, and shown us how to do.

We should feel imbued with wonder, love and praise, to our God for every fresh light and truth He unfolds to us, whether it glimmers forth from Sirius, Arcturus, or the King of Day ; or from the open book filled with the treasures of His unspeakable beneficence. These are the words of one of the masters of our school.

In conclusion I want to strike a warning note and I am done. It will not do for us to be denying the fact that the science of Bacteriology is a wonderful discovery. Letting alone the question whether micro-organisms are the cause or the result of disease, it will not do for us to ignore the utility of such an important subject. If we do so, we shall be laughed at by the medical world.

J. N. M.



## Clinical Cases.

### 1. CARBUNCLE.

Babu D. B., an elderly gentleman, priest by profession, very strong built, suffered long from diabetes which did not weaken him in any way. Frequent and profuse urination.

Had an attack of carbuncle in the beginning of March, 1915. I was called on the 10th day of the disease.

Carbuncle in the back as big as one third of the back, very much swollen, fluctuation of distinct pus on palpation.

Fever very high, temperature ranging between 102 to 104 F. Complained of pain all over the body. Great burning, much restlessness but little thirst, though the urine was profuse. Pulse was not so frequent ; from the nature and frequency of pulse it seemed to me that the temperature must not be over 100 F, though it was 103 F. at the time.

Great pain in the inflamed part and red areola around the part, sleepless night, great despondency—he said I would not live.

Appetite good and bowels normal. Much hiccup. *Pyrogallin* 200, one dose morning and evening. Much better next morning, temperature less and not much restlessness, slept well. Placbo three times today.

Hiccough troubled him whole of the next day and bowels were not moved. *Nux vom.* 200 one dose. The abscess burst open the next day and the fever subsided.

Hiccough same as before. *Placebo*. Pus sanious and bad smelling, he complained of much pain in the abscess, even slight touch upset him. Hepar s. 30, three times a day. Next two or three days he was almost in the same state, Hepar sulphur continued.

Much improved. The carbuncle was healing up. Pus appeared healthy and he gained some strength. I did not attend the next three days and he complained of great weakness ; pus was bad smelling and going on as profusely as before. He seemed not to have been much improved.

One dose of *Psorinum* 400 did wonderful work. It was followed by two doses of *Placebo*, morning and evening.

He was out of danger and was making good progress towards recovery. No more medicine was needed.

## 2. Putrid Dysentery.

Babu S. N., aged about 55, thin, haggard and anemic looking, came under my treatment in the middle of January of the present year. He had been suffering from it for the last six months. Stools four or five in twenty-four hours, consisting of slime, blood and some fecal matter. Pain during and after stools. Stools of offensive odour, mostly towards the morning.

Insecurity of the anus, had to hurry on early morning.

Slight fever in the afternoon, no symptoms, except slight heat and burning of the body.

Puffiness of the face and eyelids and slight oedema of both feet.

Urine scanty and high colored.

Disgust for all food and appetite poor.

Despondent and somewhat irritable.

*Sulphur* 200, one dose dry on the tongue. This had the desired effect ; the patient improved in every way and required no more medicine. Fever gone, stools normal, taste and appetite good, gaining flesh and strength.

He went home—a place very malarious, but reported better.

Three months after I saw him and though there was no dysentery properly so called, he was poorly and seemed to have no strength.

*Sulphur* cm. (Finke) one dose and he was improving. In this state I sent him to Madhupur, a Sanitarium, where he was almost all right. I gave him to understand that he was to remain there till the end of the summer.



#### IV. Variola.

Nawab Shaheb's daughter at Kiddyerpore, about 5 years old, otherwise healthy, had high fever; pain in the small of the back, vomiting of bile and great restlessness for two days.

Face flushed and much nausea, loathing for food and backache. This was the time when the smallpox epidemic was prevailing. I gave her *Belladonna* 200, one dose every three hours. I was called the next morning. Some pimples were visible on the face, and

wrists and a few on the chest. I thought it to be a case of smallpox, so I decided to give her *Variolinum* which was given, one dose of the 6th potency; no higher potency was found in my case.

More eruptions came out and fever abated somewhat. No medicine this day. It appeared somewhat in a confluent form on the face. Nocturnal delirium and great restlessness at night, great thirst, and disgust for food.

Merc. vivus 200, one dose.

In a few days suppuration took place and fever went up high again. *Mercurius vivus* 200 another dose. Not progressing favorably. *Variolinum* 200 one dose.

The girl recovered in a few days.

### ✓ 3 Bronchitis.

A young Mahomedan lad at Wellesley-Square, had an attack of measles in the latter end of January, 1915. The child was treated homeopathically by his father who was a layman. Apparent recovery was the result.

The patient again had high fever and violent cough and some medicines were given without much benefit. I was called and found the temperature 104°F; the child was very drowsy, did not wish to be moved, had probably some pain in the chest, cough was dry and troublesome, obstinate constipation, some hard balls were passed by enema. On examining the chest I found dry and sibilant rales all over the chest, no actual dullness on percussion.

*Bryonia* 30, one dose every 3 hours. Four doses

were given and the next morning the child was better in every respect. No medicine.

Child was still improving. Placebo, one dose, three times a day.

Passed usual stools, fever subsided entirely and all was well. No more medicine was required.

P. C. MAJUMDAR, M. D.

---

### INDICATED REMEDIES.

In performing homeopathic cures always seek for the indicated remedies ; don't be guided by theories and names of diseases. We often find, many homeopathic physicians resorting to means and measures not homeopathic to the case, without attending to symptomatic indications, and they fail. Hahnemann very truly says, nothing is known of the disease except its symptoms, and by removing these symptoms we are able to cure the disease. It is therefore said that when these symptoms are removed, there remains nothing but health. We have repeatedly observed the truth of this assertion in our every day practice.

The other day we were called to a case of obstruction of the intestines treated by a homeopathic physician from the beginning without any benefit. The case was going on from bad to worse. All the medicines mentioned in our text books, on intestinal obstruction, were given in vain. The symptoms decidedly pointed to Psorinum and we were inclined to try it in this

case. But the doctor declined to give it to his patient. Another day was passed and the case was worse and at last a dose of Psorinum 400 of Jenicken was given and to our astonishment the case improved in every respect. The father of the patient told me that as soon as the dose was given, the child was put to sleep. He was very restless and sleepless for the last three days and nights. The next morning the patient passed a good and formed stool followed by two others in the course of the day and he was cured.

Many years ago a learned and well read homeopathic physician was treating a case of cholera morbus. From Veratrum album to Carbo veg were tried and in various potencies, without stopping the purging and vomiting, and he declared to the father of the patient that nothing could be done by homeopathic medicine, and allopathic medicines and stimulants should be tried. The family had a strong faith in homeopathic medication and we were called in consultation. From the symptomatic indications we were led to prescribe Croton Tig. The attending doctor said that Croton was not a cholera remedy and why should you resort to it. We told him that the symptoms in the case pointed to this remedy. It was given in the 30th potency and a few doses cured the patient without the help of allopathic stimulants. Now-a-days we are grieved to notice that our homeopathic doctors try to prescribe or give their assent in trying saline injections and some other non-homeopathic medicines for cases of cholera. Without minding the

symptomatic indications of the case in hand, they administer medicines named in the books. Having failed to achieve success, they resort to all these means and measures and thus bring ridicule and bad name to Homeopathy. From a long time we have been sorry to notice that many homeopathic physicians finding no effect in treating intermittent fevers by name, resort to quinine and other antiperiodic medicines of the allopaths. We know from our long standing practice that intermittent fevers must be treated with the utmost care and according to strict symptomatic indications, otherwise no success can be expected. By following strictly to symptoms of the case in hand we are invariably successful. Not only so, but the cure is prompt and permanent, much better than what is done by repeated doses of quinine and antiperiodics. This is not empty vaunting and dogmatic assertion; any body can try it and find out the truth.

---

## INDICATIONS OF FEVER REMEDIES.

### ABDOMEN.

Distended abdomen—acon, abrot, acet ac, arn, apis, ars, apocy, anti t., bary. c., bell (painful), bry, china, colocy, caps, chin. s (rumbling), calc. c (incarcerated flatulence), carbo v., cupr, chel., cham, cina (hard), colch., crotal, coct (great distention), gels,

helleb, hyos, hepar s, lach (hard),  
 lyc, mag c, manyanth, merc s.,  
 merc cor, nitric ac., nux m, nux v,  
 phos, phos ac, rhus tox, sulph,  
 stann (not hard), tereb, verat alb.  
 After eating—china, lyc, nux m,  
 nux v, rhus tox.

Abdomen tympanitic—acon, arn, ars, bell, china, *carbo*  
*v.*, cocc, colch, calc. c., caps (ab-  
 domen to chest), eucalypt, graph,  
 helleb, kali m., kali phos., lyc, magn.  
 ph., mur. ac., nux m, nux v, op,  
 phos, phos ac., rhus tox, tereb.  
 Full to bursting—*carbo v*, tereb,  
 Like a drum—*carbo v.*, cham,  
 china, calc. c. (drum-  
 like hardness), colch.

Bloated abdomen—acon, apis (sore), anti cr, arg. n,  
 arn, *ars*, asar, aur met, bary c, *bell*,  
 bry., calc c, calc phos., caps, *carbo v.*  
 (upper), caust., cham, china, chin ars,  
 cocc, crotal, cupr., dig., ferr, graph.,  
 hyos., ign, iod, kali b, lach, lyc., mag.  
 c., mag. m, merc s., merc cor, mur.  
 ac, *natr. m.*, nitric ac, *nux v.*, sep, sil,  
 stram, sulph.

Whole abdomen—chin, chin ars, apis.

Lower „ —amon. c, ant. t, arn., bell  
 (. colic below umbilicus ),  
 bry, camph, *carbo v*, *chel*,



china ( pain below navel ),  
cina, ferr ( heavy ), kali c.  
( stitches ), lyc, puls ( low  
down in abdomen ), sep,  
secale ( morning ), thuja.

Upper abdomen—alumina ( pain in evening  
upto chest ), asar e, anti t,  
bry, *carbo v*, camph, caust,  
cham, gels, kali c. stan,  
sulph (under left ribs).

Stitches under ribs—acon, *carbo v*, sulph.

„ in right side—camp, lach, selen (along  
last rib).

„ in left side—bell, colch, fleur ac,  
sulph, teucr.

„ in both sides—colocy.

Abdomen tender—apis, eupat perf (on pressure), chel,  
nitr ac.

„ hard and distended—arn, ars, ant. cr, bary.  
c., bell, calc. c, chel,  
coch, cina, china,  
colocy, ferr, lyc, lach,  
merc, op, sil.

„ full but soft—ars, ant. t.

„ full as from incarcerated flatus—aloes, calc  
c, chin, *carbo*  
*v*, lyc, mag,  
phos, mosch.

Abdomen feels as if containing hard lumps—abrot,  
chin.

Abdomen feels as if stuffed—ant. t.

Abdomen hard—ARN, *ars*, bary. c, *calc. c*, CARBO V, colch, china, chel, cupr, ferr (distended, but not with flatulence), GRAPH, lach, meg. m. (right side), *nux v*, op, *petr.*, PHOS, plumb, puls, sep, sil, sulph.

Right side—magn. m.

Soreness in bowels and abdominal walls—apis, bell, bry, *calc.* ph, *nux v.*, sil.

Tight clothing oppressive—*calc. c*, carbo v, eupat perf, mag. ph, *nux v.*

As if contracted—chel., plumb, pod, tabac, verat alb.

Abdomen sunken in—apis, *calc. c*.

Heat in bowels—ars, china, ant. t, bell, camph, laur, mang, mez, *nux v*, phos, sil.

Pressure in abdomen—cupr. met.

Ulcers in bowels—apis, ars, carbo v, nitr ac, phos, rhus t., sep.

Pyer's patches—ulceration of—ign, kali c,

Spots on abdomen—apis (miliary on chest and abdomen), ars ( white miliary eruptions or roseola spots on chest and abdomen), bry ( white miliary), carbo v, hyos (roseola on chest and abdomen), phos, rhus t (roscola and miliary eruptions ), sil ( rash upon chest).

Pain in iliac region and all over abdomen—tereb.

Pain in ilio-cæcal region—bapt, bell ( ulcerative pain ),  
iod, nitr ac.

„ groins—colocy, ant cr (hardness).

„ sides of abdomen—nux v.

„ „ right side—lach, merc (can-  
not be on the  
'right side).

„ stitching below false ribs—arn ( left ), bry  
(right).

„ sudden, spasmodic in upper part of abdomen—gels.

„ in lower abdomen—phys.

„ stitching in left side—bell, hepar s, samb, sep,  
sulph.

Burning in left hypochondria—graph.

„ in abdomen—ARS, apis, anti cr, anti t ( sore-  
ness and heat in small intestines),  
agar, *acon*, calc c, calc. ph, camph,  
canth, carbo v., colch., cornus fl.,  
china, ferr, epcc, *lach*, *laur*, lept,  
lyc, mez, merc. cy. (perforation  
and peritonitis), merc s, merc cor,  
*nux v.*, PHOS, phos ac, plumb, rhus  
t, sabad, SECALE, sep, sil, stann,  
'verat alb.

Left side—sep.

Gripping and cutting—bry, chel, colocy, hepar s, ipec,  
mosch, sep, zinc.

( *To be continued.* )

# TREATMENT OF UTERINE FIBROIDS BY MEANS OF ROENTGEN RAYS.

BY WILLIAM H. DIEFFENBACH, M. D., Professor of  
Physical Therapeutics, New York Medical  
College and Hospital for Women,  
New York City.

Through the efforts of the so-called Hamburg and Freiburg schools the use of the Roentgen ray in the treatment of uterine fibroids has recently been vigorously brought to the attention of the profession, and many physicians are interested in the pro's and con's as to the value of this procedure.

Inasmuch as a new treatment such as this attacks the interests of the surgeons, it is quite natural that active and passive objection should be forthcoming, in many instances, from our surgical confreres.

In view of the low mortality and the general success of surgery in fibroids, conservatism is certainly justified. If ever surgeons have a right to raise their heads and feel conscious of success, it is in the operation upon myomata, and to have enthusiastic X-ray specialists dispute this field with them appears presumptuous unless a clear title to superiority can be established.

It will be the effort of the writer to clearly define the sphere of surgery and of Roentgen ray therapy, by comparative indications and contra-indications for the respective procedures.

As a matter of historical value the writer desires

to quote from the N. A. Journal of Homeopathy, October, 1904, pages 679 to 680, from the department of Electro-Therapeutics conducted by him at that time.

"September, 1904, 'Advanced Therapeutics' contains an article by J. Hett, M. D., entitled 'The Complete Absorption of a large Uterine Fibroid by X-Ray,' in which the author claims an apparent cure of a large intramural fibroid by means of X-radiation. His technic was as follows :

"The abdomen and chest were well protected with sheets of lead and the opening for the rays was covered with celluloid. Vaseline was also applied freely to the abdomen for protection against a burn.

"Daily treatments were given through the abdominal walls until a slight dermatitis showed itself on the twenty-third day and then a ten days' interval was given, when the redness of the skin disappeared. Ten treatments more were given and the patient advised to return home and await results.

"A hard tube was used, excited by a 16-plate Wimshurst Static Machine, about 15 inches distant, with 15-minute exposures.

"At the end of the treatment no diminution of the growth was noted, only a very slight browning of the skin. The hemorrhages, however, ceased and there was less pain. After a few weeks, during which patient developed X-ray dermatitis, an examination showed disappearance of the entire tumor and entire cessation of hemorrhages."

We quote this article in extenso for the reason that during the past year we had a similar experience, the details of which follow :

“We have hesitated about writing or speaking of the subject before, but as Dr. Hett’s case corroborates our experience, we feel that the matter should receive due publicity and other X-ray workers be stimulated to test the treatment when advisable. Both cases, it is true, may prove to have been exceptional, but test by others will soon prove or disprove this assumption.

“Case of Mrs. H., aet. 36. Called on recommendation of a friend to be examined for abdominal distress and frequent uterine hemorrhages. Examination revealed one large intramural fibroid near the right fundus fully as large as an orange, and several smaller rounded protuberances to the left of the cervix. Patient was otherwise in excellent health and we promptly advised surgical removal of the uterus, pointing out the comparative low mortality of these operations if performed in time. The patient’s reply was, ‘Doctor, my dearest friend died under the knife, and I refuse to be operated. I came to you to be treated by the X-ray and want you to do what you can for me.’ Patient was advised that no case had as yet been reported to our knowledge in which fibroids had shown shrinkage under X-ray, and that no literature could be found on the subject.

“Theoretically we thought that the growths might be affected, but we had no facts to go by. We distinctly insisted that if no improvement was secured

within a reasonable time patient would be discharged unless she would submit to surgical measures. Treatment was commenced February 25, 1904, a high tube being employed, three inches from the tissues, treatment lasting ten minutes, given in a recumbent position, three times a week. During the middle of March radio-dermatitis of a mild degree occurred and patient was given a vacation of two weeks. When she returned she notified us that her monthly period had been less profuse than usual and expressed her determination to continue treatment in spite of the fact that digital examinations showed no change in the size of the uterine fibroids. We again urged operative measures, but met with refusal. Treatment was resumed during April and May. In June radio-dermatitis again supervened and a vacation of three weeks was given until all active hyperemia had ceased. During July and August the uterine hemorrhages entirely ceased and an examination of the uterus showed entire disappearance of the large fibroid on the right side and evident clearing up of the nodules near the cervix, the uterus itself being seemingly smaller. A second examination instituted about September first corroborated the previous examination. Patient at present writing is under surveillance and will come in monthly for examination, her general health being excellent in every respect. The last monthly period lasted three days with very moderate uterine discharge.

"We trust that readers who use radio-therapy

will, in suitable cases, test the effect of this new agent in fibroids and report their cases. The limitations of this wonderful power can only be gauged by its failures, and we need corroborative evidence of its value in fibroids before recommending it without qualification in their treatment."

This patient is well today and this article is cited to establish priority for American physicians, for Professor Albers-Schoenberg of Hamburg claims that he was the first to advocate radiation for myomata in the year 1905—fully one year subsequent to the cases just cited.

The judgment expressed in 1904 and here recorded that the treatment of choice for fibroids should be surgical has not been altered during the past ten years, although a number of patients have since been treated by means of Roentgen rays for this condition.

Indications for the use of the Roentgen ray in uterine fibroids are as follows ;

- I. Advanced tuberculosis pulmonalis.
- II. Diabetes.
- III. Chronic nephritis.
- IV. Marked cardiac lesions.
- V. Arterio-sclerosis and old age.
- VI. Hemophilia.
- VII. After 35th to 40th year, especially if surgical phobia exists.
- VIII. Any other severe complication making operation hazardous or dangerous to the patient.
- IX. Where operation is refused.



Indications for preferring and urging Surgery.

- I. All women having fibroids before the 35th year, as sterility and premature climaxis are caused by Roentgen-ray treatment.
- II. Where diagnosis is doubtful ; the exploratory incision clears up many doubtful lesions with complicating ovarian cysts or dermoid cysts.
- III. Where malignancy is suspected—danger of delay where sarcomatous or carcinomatous degeneration exists.
- IV. All cases of gangrenous myomata.
- V. Submucous and pedunculated fibroids especially involving the cervical region.
- VI. Injury to the bladder with adhesions may be caused, and injury to the intestines with chronic diarrhœa has been reported in isolated cases after Roentgen ray treatments.
- VII. The remaining atrophic mass after Roentgenization may, in some cases, degenerate and thus be a source of danger to the patient.

Regarding the relative expense, the cost of operation plus hospital fees will no doubt be somewhat higher than a number of serial treatments with Roentgen rays, but in surgical cases (uncomplicated) results are achieved within three weeks, while Roentgen ray treatments must be given for from three to nine months.

The latter treatments, however, do not cause any detention from usual occupations, require no hospital life and have this feature in their favor. As regards

mortality, while surgery has an average mortality of about three per cent, Roentgen-ray treatments have no mortality at all. In the latter, however, subsequent degenerative changes may, in after years, cause complications materially affecting the life of the patient.

*Technic :*

The technic of the Roentgen-ray treatments has for its object the production of atrophic changes in the uterus and ovaries. This is accomplished by means of massive radiation and can now be safely applied since the general adoption of filters.

Aluminum filters of 1-2 m. m. in thickness are preferred and Tint B. Sabouraud disks is the dosage applied at one sitting. This dosage is secured in various periods of time depending upon the source of current utilized to energize the tube.

If coils are used water-cooled tubes are necessary or the usual tube must be replaced during the treatment. With the Coolidge tube but a short exposure of one to three minutes is required to produce this tint.

My own technic consists in the use of a twelve-plate static machine, a six-inch tube, 6-8 Benoist penetration and an exposure of one to one and a quarter hours. This radiation is filtered through 1 m. m. aluminum and the tube is placed twelve inches distant from the parts treated, in a heavy lead glass tube holder.

The parts of the patient not treated are covered with heavy lead sheets, and in addition the eyes and

head of the patient are protected by lead coverings. The parts to be treated are divided into three sections : right ovarian, left ovarian, and uterine. These are treated, one section daily, the part not treated being covered with heavy lead sheets and the exposure of the treated section is given through the filter. After the three sections have been treated, a rest is given of from fourteen to eighteen days to await reaction.

It is customary to start treatment one week after cessation of menstruation, but the period soon becomes irregular and after the third series usually ceases. The period of rest between treatments of fourteen to eighteen days is, however, retained until atrophy has been secured. It is a well established fact that Roentgen rays have a selective action upon glandular tissue and the ovaries shrink and atrophy quickly under their influence. Obliterating endarteritis of the smaller blood vessels is also produced if marked reaction is induced in the tissues and atrophy of fibroids can be noted after three to four months.

It is well to cease treatment if this object has been secured, and monthly examination can be made to note final results. If necessary, subsequent series of treatments can be applied if the result has been only partially accomplished.

In my practice it is customary for the patient to come in for a period of nine to twelve months before receiving the final dismissal.

It is well to warn the patient of the artificial menopause which this treatment will produce, and it is also

prudent to have an understanding as to possible effects upon the bladder and intestines. These latter effects have, however, not been noted frequently.

The cumulative effects of Roentgenization often produce what the Germans have called "Roentgen-Kater," which can be roughly translated as an "*X-ray jag or fag*," during which the patient is depressed and irritable. This nervous manifestation usually responds to ordinary remedies and in a few days passes away.

In October, 1914, "Surgery, Gynecology and Obstetrics," Doctor John A. McGlinn has an interesting contribution entitled: "Can Surgery be eliminated in the Treatment of fibroid tumors of the uterus?" His conclusions are as follow :

"I. Surgery is the best treatment in fibroid tumors of the uterus and cannot be supplanted by any known form of treatment.

"II. Roentgenotherapy has an important place in the treatment of these tumors.

"III. Surgeons and Roentgenologists should not enter into competition with each other but should work hand in hand for the relief of womankind."

While agreeing with the last two statements, the first postulate is contradictory of the second and too dogmatic to be acceptable.

As has been demonstrated, surgery can often be supplanted by Roentgenotherapy, although it is, in the judgment of the writer, always the method of choice, other factors being equal.

The Roentgen ray can be utilized for palliation

when surgery is powerless, as in severe cases of metrorrhagia and can, in some instances, produce changes so that surgery can be utilized later on.

While the Freiburg and Hamburg disciples at present prefer Roentgenotherapy for the treatment of fibroids to surgery, judgment on this subject must perforce still await the verdict of time.

Good judgment and a view of the whole field must be invoked for the benefit of each individual patient and the best method selected from the data obtained after a careful examination and history.

A review of the indications and contra-indications attempted in this paper may aid in the proper conception of the duties of the physician and surgeon to his patient in the treatment of this lesion.

—*The New England Medical Gazette.*

## CALCAREA SILICATA\*

BY ELMER SCHWARTZ, M. D., CHICAGO, ILL.

### CHARACTERISTIC IMAGE

Calcarea Silicata is a remedy of very deep action, with symptoms manifesting at all hours of day and night.

Evening, night, and morning are however the periods of most intense aggravation.

CALC-SIL. has a profound action upon the skin, mucous membranes, bones, nerves and glands.

---

\* Compiled from writer's clinical experience and Works of J. T. Kent, A. M., M. D.

Discharges from mucous membranes, from ulcers and from abscesses are THICK, GREENISH-YELLOW, PURULENT :

Especially characteristic IN THE CATARRHAL CONDITIONS OF THE LUNGS :

WITH MUCH SORENESS, AND PROFUSE EXPECTORATION, usually most pronounced in the morning.

These individuals are extremely sensitive to drafts and to weather-changes from warm to cold ; although some patients feel better in the open air.

There is extreme paleness, as observed in anæmia :

Associated with weakness,

Difficulty of respiration when ascending stairs, as in both Calcarea and Silica.

Emaciation is prominent, especially in children who have inherited phthisis.

Prostration, from least exertion, which increases many of the symptoms.

Weakness similar to Ars. and Chin., or as from loss of fluids.

The patient experiences weakness, night-sweats and faintness.

Muscles become flabby, while the body feels heavy and the organs drag down.

These patients are always cold, lacking vital heat ; yet :

Are intensely aggravated through being overheated.

All internal parts have sensitiveness to jar.

Some relief is had from lying down, but most comfortable from lying on the back ;

Lassitude returns, however, so soon as he walks about,

Compelling him again to lie down for relief.

Wants continually to lie down.

Symptoms are worse from motion.

Especially worse in the evening and night.

Weakness, night-sweats and seminal emissions suggest complaints following onanism.

Think of Calc-sil. for complaint of intense weakness.

Especially in the morning when walking, or :

From the least mental or physical exertion, or even :

When walking in the open air. Intense nervous weakness ; the patient complains of being always so weary.

Weakness and other symptoms all are aggravated while standing.

Numbness in single parts :

In painful parts, and :

In parts on which he lies.

Wet weather brings out all the symptoms or sufferings of the patient ;

With much difficulty does he live through the winter :

His symptoms are increased during the winter, and :

Improve in summer.

Aggravation recurs from uncovering, and :

Walking in the cold open air.

Patients are absent-minded.

Excitable and easily angered;

Worse after anger, and ;

When alone.

Anxiety manifests in the evening and during the night, in bed.

General oversensitiveness prevails ; oversensitive to pain : even the bones are sore to touch ;

Soreness is felt internally.

Stiffness of the body, back and extremities :

When cold, and :

After sweating ;

After exertion.

Inflammation, swelling and dropsy of the affected parts occur, with :

Hardness of the glands, and :

Aggravation from touch ; dread of being touched.

Trembling of the body and limbs,

Associated with twitching of the muscles.

The pains of CALC-SIL. ARE CUTTING, STITCHING, TEARING, boring, burning, jerking and pressing in character ;

Burning pain even in internal parts, from impairment and slowness of function.

Sensation of pulsations, all through the body, internal and external.

Blood seems to rush from the body to the head,

With flushes of heat.



Veins therefore become much distended :  
 With sensation of fullness in many parts.  
 In view of these features, no wonder that CALC-SIL  
 is useful in epilepsy.

#### MENTAL

Patients desire many things, of which they soon  
 tire ;

Nothing suits ;

They become critical.

Inability for mental concentration appears.

He loses confidence in himself ;

Becomes confused, especially AFTER MENTAL EXER-  
 TION.

Consolation irritates him ;

He becomes contrary ;

Timid ; cowardly.

Patients often sit long in one place, looking into  
 space ; not even answering when addressed.

They often talk nonsense ; of foolish things :

Talking incoherently and of impossible things,  
 but :

Will answer questions correctly and then begin  
 muttering.

The delirium may be passive or with speech and  
 actions as of one insane.:

Even talking to imaginary people ( those long  
 since dead).

*( To be continued. )*

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV.]

JUNE 15, 1915.

[ No. 6.

---

## SULPHURIC ACID.

Dr. Butler says "In the study of this drug, either in its pathogenetic or its clinical records, we find certain symptoms, conditions or modalities which are marked and peculiar ; and some one or more of which will usually be present in the diseased conditions in which this agent will prove curative."

In the study of sulphuric acid in its clinical and pathogenetic symptoms these peculiarities are observed in all its varieties. We observe that depression and weakness are always found in this medicine ; mental dejection or depression of mind, unfit for work, would weep and sit all day, unwilling to answer questions. Sense of exhaustion is out of proportion to the pathological conditions. In the "Guiding Symptoms," we find great debility ; sensation of tremor all over the body, without actual trembling.

Great exhaustion and nervous prostration. The

patient will tell you that he is so weak that he feels an internal trembling. We find weakness and prostration after diarrhoea and here this medicine acts well when China and others fail.

It is a good remedy for many kinds of pain—headache, rush of blood to the head, &c.

In facial neuralgia, right side is mostly affected ; gnawing pain, also aching and jerking on the face from temple to lower jaw.

Character of the pain is that it increases gradually to a certain extent and then suddenly ceases.

It is useful in *toothache* which is aggravated in the evening, in bed and from cold, and better from heat. In cancrum oris it is a valuable remedy ; not so much sloughing, but rapid extension of ulceration and bleeding from these ulcers ; in diphtheria, ulceration of throat with large greyish or yellowish sticky exudation.

Intolerance of water in the stomach is very characteristic of this medicine. Water cannot be tolerated, ejected as soon as it cools the stomach ; but if you mix alcohol with the water, it is then easily borne without any nausea or vomiting.

It is a good remedy for drunkards. Hering says “successfully used in subduing craving for liquor by taking for two or four weeks, three times daily, from ten to fifteen drops of a mixture of one part of sulphuric acid with three parts of alcohol.”

This is a very easy prescription for those who are in earnest to leave off the bad habit of drinking. Sulphuric acid is also a medicine for the effects of

chronic alcoholism. Symptoms—vomiting in the morning, acidity of stomach, burning throughout the esophagus and stomach, sour or foul eructations. It is a good remedy for dysphagia.

In inguinal hernia, especially on the left side with pain, it may be of service.

Dyspepsia with gastro-intestinal catarrh.

Hiccup with vomiting of bitter or *sour* things. Diarrhœa of sulphuric acid is very peculiar and characteristic. We have often cured obstinate cases of diarrhœa with it ; even choleraic diarrhœa is beautifully controlled by it.

Stools yellowish white or saffron yellow, sometimes mixed with blood. Greenish stools watery and offensive, smelling like rotten eggs. Pinching and burning in rectum and anus. After stool great exhaustion.

Summer diarrhœa after eating unripe fruit. In cholera infantum it is of great value ; suitable for severe form of entero-colitis. Here the stools are frequent, of slimy mucus and blood, accompanied by great exhaustion, aphthæ, vomiting of curdled milk, sour vomiting and child smells sour. It is often caused by the acidity and dyspepsia of nursing mother or wet-nurse.

In the male sexual organs, orchitis of the right-side.

In the female sex, great diversity of symptoms are observed. Menorrhagia, metrorrhagia, dysmenorrhia and after pains.

Menses too early and too profuse.

Prolapsus of vagina. Leucorrhœa acrid and milky.

Berridge mentions short hacking cough, gasping for breath. Cough is worse in open air and cold.

Hæmoptysis from slight exertion.

Sulphuric acid is very good for hemorrhage from all parts of the body. Epistaxis, hæmoptysis, uterine hemorrhage. Purpura hemorrhagica. Profuse hemorrhage from the lungs in tuberculous patient.

Exhausting sweat is another characteristic of sulphuric acid. Profuse sweat at night with slight exertion. Cold and sour sweat. Emaciation and extreme weakness.

Sulphuric acid is therefore a good remedy for sweaty, emaciated and broken down phthisical patients.

Our experience in dose is in the lower potencies from the 6x to the 30 potency.

These serve me well in all my cases.

It should not be repeated too often especially in broken down constitution.

P. C. MAJUMDAR, M. D.

## Clinical Cases.

P. C. MAJUMDAR, M. D.

### I. Sciatica—Gnaphalium.

An elderly gentleman suffered long from sciatica of the right side. He was otherwise healthy.

Pain of a stitching and burning character, at the acme of pain the parts became numb. It was aggravated in the morning and by moving the limb. Ameliorated by warm application and giving rest to the affected parts.

No history of syphilis, gonorrhœa or any other specific disease.

Never suffered from scabies in younger days. Occasionally subject to cold and cough.

Bowels generally constipated but the constipation was not of an obstinate kind ; change of food gave him great relief of constipation.

It was a very troublesome disease ; allopaths and kobirajes could give him no relief.

At last he came to me, and without much looking after I gave him Bryonia 30, morning and evening.

No relief in three days. Bryonia 200 one dose dry on the tongue. No more medicine for three days. No benefit.

Gnaphalium 6, one dose morning and evening. He got relief at once and was cured for ever.

## II. Chronic Diarrhœa—Natrium Sulph.

A youngman came to me with emaciated look and care-worn appearance and much dejected in spirit. He said that he had been suffering long from dyspepsia and diarrhœa for which he had taken all kinds of medicine without any permanent effect. His former doctors advised him for a change to Darjeeling or some

other cool place. He did so, but his complaints were ten times aggravated.

He had generally from three to five stools, mostly in the morning from 6 to 10 A. M.

Stools were yellow, watery and copious, passed in gushes with much flatus.

Much rumbling in abdomen which was puffed up with wind, mostly in the right side. Liver was painful on pressure and there was slight chronic enlargement, dulness on percussion a little beyond. Appetite dull.

Urine copious and high colored, loaded with something like Phosphatic deposit.

Some three or four medicines came in my mind but I gave Natrum sulph 30 twice daily. The good effect was perceived in three days and he improved in every respect.

Placebo twice daily, improvement continued. Two weeks after he had some indiscretion in food which upset the bowels again. Stools were watery and some flatulence was noticed.

Natrum sulph 200 one dose and cure was perfect.

### III. Dyspepsia—Lactic acid.

An old lady, of spare body and nervous constitution, called me to do something for her long continued and troublesome dyspepsia.

Had good appetite, anything taken into the stomach caused immediate accumulation of wind and distress.

Morning meals she could take well but it also required long time to digest it. The evening meals were

followed by considerable amount of gas and the abdomen became tense and full.

Bowels constipated, hard stools passed with difficulty, sometimes manual help was required.

Urine was copious and frequent and on examination found to contain a small amount of sugar and some phosphates. Much thirst for water.

Wind passed was hot and accompanied by rumbling noise.

She suffered from cough and cold after.

I gave her Nux vom 200 one dose at once, followed by placebo three times a day.

Not better, much flatulence and urine increased : constipation very bad.

Lactic acid 6, one dose morning and evening. This had the desired effect at once. She reported to me that her constipation was very much better and wind was considerably less.

Placebo. Continued better, urine was also less and no sugar on analysis.

Placebo, twice daily.

The lady was cured after taking Lactic acid for three days.

#### IV. Gangrene of Foot—Bryonia.

Babu K. D, an elderly gentleman of active and robust constitution, had a corn in the big toe of the right foot which was painful.

Notwithstanding difficulty and pain in walking he continued his active business and got worse.



The corn inflamed and he was down with high fever, delirious talks of his business, great thirst and complete prostration.

I forgot to mention that he was diabetic for a long time. Habitual constipation.

I was called and found him in this condition.

Besides, there was gangrenous ulcer which had a tendency to spreading. Talked to me but not quite sensibly. Temperature 104 F.

Bryonia 200 morning and evening.

I visited him next morning ; temperature 101 F. Delirium gone and the patient quite sensible.

Placebo, three times a day.

Spreading of gangrene stopped and the parts assumed a healthy appearance. Healthy pus came out in small quantity.

I had no other medicine to give him and he made a complete recovery in a short time.

If any homeopathic physician is asked "Have you ever cured a case of gangrene with Bryonia", he will certainly say such things are impossible. Of course such a person is a pathological homeopath and wants to cure the disease by name and not the patient. I took the totality of symptoms of the case and prescribed accordingly and the effect was marvellous. To speak candidly, I did not expect that Bryonia would do anything to stop the gangrenous invasion in the part and make the sore healthy in appearance. But contrary to my expectation everything was achieved in a short time and permanently.

We therefore advise our brethren in the homeopathic fraternity to stick to the advice given by Hahnemann in his philosophical work—the Organon, and cure cases which are said to be incurable by medicine.

---

## VERIFICATIONS.

*Sabadilla.* Very useful in intermittent fever ; chilliness with yawning, gaping and profuse flow of tears, then heat ; slight thirst, cases of intermittent fever suppressed by quinine?

*Lachesis.* A young man, fear of going out, liquid food hurts his throat, palpitation after breaking of sleep in the latter part of night, constipation. One dose of *Lachesis* 200 promptly cured.

*Rhododendron.* Several cases of rheumatism are cured by this remedy. Aggravation in *wet stormy weather*, worse during rest and better by moving about.

Testicles swollen, painful and drawn up and sensitive to touch. We have cured several cases of orchitis of non-syphilitic and non-sycotic origin with this medicine. Hydrocele is often benefited by it.

*Aloes.* In anal pains it is of immense value ; soreness and throbbing at the anus, especially after stools. Piles painful, pain lasts several hours after stools, worse by touch or movement, relieved by application of cold water. Many cases of dysentery or dysenteric diarrhoea have been cured by it. Stools are bloody

and mucous, with tenesmus, much wind in stomach, with rumbling but good appetite.

*Natrum mur.* In higher potencies it cures intermittent fever. In a boy æt 10, many months' fever with enlargement of spleen; fever came with chills at about 10 A. M. followed by heat, hammering headache, thirst in all stages, anæmia and constipation. *Natrum mur* 200 cured him in a few days. One dose only given during intermission at night.

*Sepia.* A young lady, thin and rather anemic looking; prolapse of the uterus, dragging sensation in the uterus, obstinate constipation and hemorrhoids cured by *Sepia* cm. Lower potencies had temporary or partial effect.

*Sulphur.* An elderly gentleman, burning over the whole body, top of the head moist, hands cold, feet kept out of cover, constipation, had taste in the mouth after rising in the morning, ravenous appetite two hours after rising. All these symptoms disappeared by one dose of sulphur 1 m.

*Azadirecta.* A young man, with chronic fever, constant burning of hands, feet and eyes in the afternoon, cough and constipation. He was drugged with quinine and declared to be consumptive, no hope of cure, was readily cured by *Azadirecta* 30 morning and evening for seven days.

*Selenium.* A young girl æt 14, otherwise healthy, suffered long from loss of voice. She had good voice before and could sing well. No cough but sometimes raised a viscid mucus by exertion. *Pulsatilla* and

Causticum had been tried in vain, but Selenium 30 effected a cure in a short time,

*Kali sulphuricum.* Fever and cough. An elderly gentleman had been ailing for some time and was treated by many physicians of the old school, without benefit. They thought it a case of phthisis mucosa and incurable. Cough loose and rattling, tolerably a good quantity of sputum, yellow and thick, passed each time. Fever in the afternoon. Burning heat, no thirst, better in open air and worse in the room. Pulsat was tried without benefit. Kali sulphuricum 30 cured in a few days.

*Ruta.* It is very much like Arnica or Rhustox in cases of rheumatism. A youngman had rheumatic pains all over the body, more in limbs and joints. They were bruised in character, aggravated by cold and wet weather and ameliorated by movement. Bowels were constipated.

Failing with Arnica and Rhustox, we tried Ruta 6x for three days and much improvement was noticed. Complete cure was effected.

P. C. M.

---

## CALCAREA SILICATA.

*(Continued from page 160, No. 5, Vol. XXIV.)*

Wife imagines that her husband (deceased) is in the next room—she grieves because she is not allowed to see him ;

At other times the mother calls a living son by the name of one who died.

Patients wander about the room all night without sleep, conversing apparently with dead relatives and friends.

Many delusions about the dead ;

Of corpses ;

Of dogs, and :

Of images.

Have horrible visions of disagreeable persons ;

Even half-awake their illusions are so vivid, they hear and answer voices of the dead.

What wonder that these patients are discontented, discouraged and in despair ; they think they are incurable.

Mentally dull, they have imaginary fears and vexations from mental exertion.

All mental and physical symptoms are worse from mental exertion.

Emotional and easily moved to laughter or tears.

Forgetfulness, such that he cannot recall the sentence he has just spoken.

Easily frightened ;

Startle easily, even during sleep.

Always in a hurry ; yet :

Ambition utterly lacking ;

No desire for mental or physical work ;

Averse to exercise.

Many hysterical manifestations ;

Ideas many at night and deficient during the day.

Many of the mental symptoms and the general appearance of the patient resemble an approaching imbecility.

Marked irritability in the morning and evening ;

After coition ;

From consolation ;

During a headache.

Laments and wails ;

Lascivious and loathes life ;

Moods are changeable, until he finally becomes morose, but :

Generally better occupied.

Extremely prostrated mentally.

Restless, anxious during night ;

Sad in morning and during the day.

Mental depression apparently without cause ;

With dulness of senses, yet :

Very sensitive to noise, or :

Sensitive to rebuke.

Suicidal tendencies ;

Wanting to sit in silence.

Timidity and bashfulness present at times ; also

Conduct automatic, unconscious.

Weeps often at night, in sleep :

From imaginary fears and worries ;

Sits and weeps, by the hour.

#### MODALITIES.

Patient is extremely sensitive to drafts.

Worse from cold ;

From cold air ;

From becoming cold ;

In cold, wet weather.

From change of warm to cold weather.

All symptoms are worse from motion.

Prostration from least exertion.

Many symptoms are worse from coition.

Symptoms are worse during and after eating ;

Sensitive to wines and alcoholic stimulants.

More comfortable on low diet ;

When fasting.

#### PARTICULAR MANIFESTATIONS.

VERTIGO seizes the patient when looking upward,  
or :

While lying ;

From mental exertion,

Associated with nausea.

#### HEAD

THE HEAD IS COLD :

Especially the vertex and occiput ; although  
there is :

Congestion of the head at night ;

When coughing.

Forehead has sensation of constriction.

Head inclined to fall forward,

Head feels heavy in morning ;

Heaviness in forehead especially.

Patients sometimes suffer from hydrocephalus,

With sensation as if brain were in motion.

Pains of the head are intense, involving all parts,

Aggravated in morning ;

Aggravation from cold air,  
 From draft,  
 From cold damp weather,  
 Headaches are worse from jar  
 From light,  
 From noise,  
 From mental exertion.  
 May come every day, or :  
 Only once a week.

Pains are pulsating, burning, bursting, pressing,  
 or jerking ;

The head feels stunned.

#### EYES

COLORS, SPOTS, FLOATING SPOTS, sometimes dazzling,  
 appear before the eyes ; making :

Reading with customary glasses impossible.

Exertion of vision causes headaches and many  
 nervous symptoms.

#### EARS

Ears have DISCHARGES : OFFENSIVE, PURULENT,  
 THICK, YELLOW AND GREENISH-YELLOW ;

May be watery, offensive and bloody.

Flapping sensation is in the ears ;

Heat and itching deep within ;

Associated with noises.

#### NOSE

Vicious catarrh of the nose ; of the posterior nares,  
 extending to the frontal sinuses ;

Chronic coryza, with cough,



Becoming fluent in the open air, although patient himself feels better in open air.

Hay-fever often cured by this remedy.

Crusts are often blown out of the nose, with :

Discharges : excoriating ; OFFENSIVE, PURULENT ;

THICK, YELLOW OR YELLOWISH-GREEN ; OR :

COPIOUS, BLOODY, THIN OR WATERY.

A most useful remedy in ozæna.

With much pain in the upper part of the nose, and :

Soreness inside the nostrils.

#### FACE

The face is very pale ; of an earthy color, although :

During headache it is red, with circumscribed red cheeks and dryness of lips.

Face may be covered with boils, comedones, pimples, and scurfy eruptions.

Pain in the face, from cold ;

Boring, drawing, stitching and tearing,

With relief from warmth.

#### MOUTH

Mucous membrane of the mouth is covered with aphthæ ;

Gums bleed ;

Tongue is coated white ;

Mouth is dry or has copious flow of mucus.

Teeth feel sore when masticating, and :

Pain from cold air, or :

From anything cold in the mouth ;

• With relief from external and from internal warmth.

## PHARYNX

Tonsils and pharynx become inflamed, associated with dryness and redness, with :

- Constant effort to clear the throat.
- Much pain in the throat when becoming cold ;
- When coughing or swallowing.

## STOMACH

- Sense of anxiety felt in the stomach ;
- Appetite assumes any phase.
- Sensation of coldness or emptiness in the stomach.
- Waterbrash ; heartburn ; hiccough ;
- Fullness in stomach after eating.
- Pains are bruised, burning, cramping, cutting, pressing ;
- Stitching, in the evening ;
- After eating.
- Pulsation in the stomach ;
- Sensation as of a stone ;
- Thirst : intense, burning, afternoon and night.

## ABDOMEN

- Distension of the abdomen after eating ;
- Dropsy :
- Flatulence, with much rumbling and fullness ;
- Abdomen and liver are hard.
- Pains are burning, cramping, cutting, pressing, stitching and tearing.

## RECTUM

- Constipation is severe ;
- Evacuation difficult, with :
- Sensation of paralysis in rectum, while :

Anus is constricted.

Diarrhœa occurs.

With painless evacuation :

Stool is copious, lienteric ;

Odor offensive, putrid, sour ;

Pasty, thin, watery.

#### URINARY ORGANS

Urging for frequent urination during night ;

Involuntary urination in sleep,

Sometimes scanty.

Cutting and burning pain during urination ;

Urine either copious or scanty.

Diabetes mellitus has been cured with CALC-SIL.

Urethral discharge may be purulent, greenish, yellow.

#### SEXUAL ORGANS

Seminal emissions ;

Sexual desire increased and strong,

Without erections.

Desire increased in the female ;

Associated with eruptions on the vulva, and :

Much itching.

Heaviness and prolapsus of the uterus.

Leucorrhœa excoriating, bloody, copious ;

Before and after the menses.

#### AIR PASSAGES

CHRONIC IRRITATION OF THE AIR-PASSAGES, WITH  
COPIOUS YELLOW-GREEN MUCUS.

Rawness in the larynx and trachæa ;

Phthisis of the larynx ;

*An important remedy for phthisical subjects.*

Cough at night ;

In morning when rising ;

In evening, in bed,

Dry at night,

*With much expectoration in morning.*

Paroxysmal and spasmodic,

Racking the entire body.

*Expectoration in morning is bloody, greenish, yellow, copious, purulent ; sometimes white.*

#### CHEST

Pain : burning, pressing, stitching ; soreness and rawness.

PHTHISICAL CONDITIONS AND EXTREME WEAKNESS OF THE CHEST.

Palpitation of the heart at night ;

After eating ;

From exertion ;

From even slight motion.

#### BACK

Sensation of coldness in spine ;

In back of neck, and ;

In sacrum.

Much pain in the back ;

Especially at night.

Spine is sore in many places.

Stiffness of the back ;

Especially of cervical region ;

Tension of the cervical region.

Weakness of the back ;

Especially of the lumbar region.

#### EXTREMITIES

Coldness of the legs and feet,

Evening and night.

Contraction of the tendons of hands and fingers.

Corns : painful, sore, stinging.

Cracks in hands and fingers.

Cramps ;

Itching eruptions.

Heaviness of all the limbs ;

Especially the legs and feet.

Numbness of the extremities ;

Especially hands and fingers.

Sensation of paralysis and stiffness of the upper and the lower extremities.

#### DREAMS

Anxious, frightful, horrible.

Of murder, with nightmare.

#### FEVER, ETC.

Chills, with trembling from uncovering ;

Patient desires warmth ;

Not relieved by warm room.

Evening and night have marked fever.

Skin-eruptions of many forms, and all kinds of sensations.

#### RECAPITULATION.

INTENSE LASSITUDE ;

• *Wants continually to lie.*

*Some relief lying down.*

*Intense weakness ;*

*Especially in the morning, when walking, or :*

From the least mental or physical exertion ;

Aggravated even by motion,

By walking in the open air.

Nervous weakness :

*Patient complains of being always so tired ;*

Least exertion prostrates, compelling to lie down again.

SENSITIVE TO COLD, TO DRAFTS, AND TO WEATHER CHANGES ;

WORSE DURING THE WINTER ;

IMPROVED DURING THE SUMMER.

ABSENT-MINDED ;

Excitable and easily angered ;

Worse from anger and when alone.

Mental derangements :

Imaginations of all sorts ;

Delusions about the dead.

ALWAYS IN HURRY, yet :

Ambition utterly lacking.

Oversensitiveness prevails ;

Sensitiveness to pain :

Bones and internal parts sore.

Stiffness of the body, back and extremities :

When cold ;

After sweating ;

From exertion.

IRRITATION OF THE AIRPASSAGES, and CHARACTER OF DISCHARGES are most characteristic of the remedy.

## DISCUSSION.

Dr. Grimmer : The doctor here presents a true proving-picture of me when I was a sophomore in college ; especially in the mental stages :

The lapses ;

Depression ;

Weakness ;

Almost complete loss of memory ;

Sentences were not remembered the minute after speaking ;

Inability to concentrate ;

Incapable of ordinary mental processes.

I took this remedy, one-thousandth potency, three or four times a day, for ten days without much result : the symptoms were very slow to appear. Of course when the action was obtained, it was tremendous ; it continued with me for six months.

Intense headache was one of my first symptoms :

Worse through the temple-region ; and as I remember it : more confined to the left side ; with :

Sensation of a tremendous brain-tumor pressing everything out, when waking in the morning.

Sensation that I could not move ; motion ( to rise early ) seemed impossible. After exertion of much will-power I managed to rise, and after moving about for twenty or thirty minutes that terrible pain disappeared.

Extreme sensitiveness to cold drafts was a strong point noted : I am usually warm-blooded, but while under influence of CALC-SIL. this sensitiveness was oppressive. Cold effects in catarrh were brought out.

## THERAPEUTICS IN PARTURITION.

E. A. BALLARD, M. D., CHICAGO.

*Aconite*.—In labor with her first child. Pains attended with great restlessness, throwing herself from side to side and crying, "Oh, let me die ! let me die !" One dose quieted in five minutes, and the child was born in a few minutes.

*Calc. carb.*—Latter part of sixth month of her second pregnancy. Labor pains continued throughout the day. In the evening they were frequent, hard, downward, pressing mostly in front, with a free, bright show. Os dilated so as to readily admit the finger. During the pain she cried, "hold me down ! hold me down !"

Analysing this symptom, I found that the stomach was greatly distended, standing outward like half a bladder, with a sensation during pains as if that part of her body was rising. One dose controlled the case at once. At the termination of her seventh month she was again threatened with miscarriage. Pains undefinable, not near so hard as before. Anxiety, restlessness, changing from bed to chair, walking about ; dislike to be alone ; cold perspiration. One dose of Arsenic and an easy labor at full term.

*Nux vomica*.—Besides the well known indication desire to stool or urinate with every pain, which I have repeatedly verified, we may find the pains wholly or principally in the back, and during the pains the patient must stand or walk about—likes to



have her back rubbed. One lady has in two different labors quickly felt the benign effects of this remedy after twelve hours of do-nothing pains. There were more of the mental symptoms of Nux.

*Pulsatilla*.—Regular, hard, downward pressing pains at the beginning of the fifth month of pregnancy. Sepia did no good. Found that every pain was accompanied by loss of breath. Remembering to have read in Lippe's Repertory, "difficult respiration accompanies diseased conditions in parts not involved in the act of breathing, Puls." I gave one dose, which quickly righted matters. ' "

Another case ; patient had between pains shivering and chattering of teeth without chilliness. This started each time from exterior middle portion of right thigh, where there was also a shivering. No relief following the exhibition of Actea Race. I sat down to consult my repertory when I noticed that there was a disposition to weep with every pain. A few minutes after taking a dose of Puls. all these symptoms ceased, the pains became expulsive, terminating the labor in about twenty minutes. The patient described the effect of the remedy as that of a large ball which went straight down and pushed the child out without any effort on her part.

Unless another remedy is plainly called for I always give a dose of Arnica at the termination of labor. I have used it in low, medium and high potencies. Since using the higher I have had less trouble with after pain, but I am not certain that the change was

not due to the exhibition of the indicated remedy during labor, for in many such cases I have marked the absence of these pains while in other cases they were promptly controlled by the remedy that has proven homeopathic to the labor pains. In one case where the after-pains were excited by child nursing, slamming a door, or sudden noise, Arsenic cured.

*(Transaction, J. H. A.)*

---

### ANACARDIUM IN COLIC.

A young woman from Krishnagore suffered long from colic pain and was treated by allopathic, kabi-raji and homeopathic medicines without much benefit.

She was dyspeptic for a long time. She was emaciated and bloodless.

Pains came on generally in the evening when the stomach was empty ; as soon as some food was taken, the pains were mitigated for the time being. Acid vomiting when no food was taken. Had acid rising. Pains of a burning and stitching nature were always aggravated in empty stomach and as soon as little food was taken, she was relieved. But the effect was temporary.

Bowels obstinately constipated. Frequent urging for stools. She felt that something obstructed the passage of stools.

Very irritable when the pains came and sometimes often.

Nux vom. and Arsenicum were tried without any benefit.

I gave her a dose of Anacardium 200 during one

paroxysm of pain and it relieved instantly and that relief was followed by a complete cure.

---

### CYSTITIS CURED BY CAUSTICUM.

An elderly gentleman æt 62, tall, thin but well nourished, had to get up frequently at night to evacuate the bladder.

Urine not very copious but as soon as little quantity was accumulated in the bladder, he was to remove it, otherwise burning and distress was caused, even involuntary micturition resulted.

He became weak and emaciated. On analysis of urine, specific gravity 1015, lots of mucus and epithelial scales were observed with traces of albumen and blood.

His appetite got poor every day and his strength was failing. There was burning sensation in the stomach, had to eat frequently but became emaciated and weak.

He was sad and despaired of his recovery. I tried several remedies with partial success, only temporary relief which was followed by great aggravation of symptoms. At last I gave him Causticum 200, one dose, followed by Placebo morning and evening. He was better in every respect, especially about his mental symptoms. He was soon cured and went to work as a teacher.

Next year there was a relapse in one of our hill stations and Causticum cm. cured him at once.

---

P. C. M.

## "CORRESPONDENCES."

By A. EUGENE AUSTIN, M. D., H. M., NEW YORK.

INTRODUCTORY NOTE: "*The homœopathic method of healing—the most consistent, the simplest, the surest and the most beneficent of all earthly ways of healing human disease—follows the way consonant with Nature. It administers only those medicines to combat the disease of mankind whose pure effects have been tested by observing the changes they can effect in a healthy man: this is Pure Materia Medica.*

*He who will take the trouble to choose the remedy for a disease by the rule of the most perfect similarity, will ever find in it a pure, inexhaustible source whence he may derive the means for saving the lives of his fellow-men.*"—S. HAHNEMANN.

All have heard of—perhaps you have visited—the mountain-forest of south-western Europe, the famous Black Forest filled with associations of ancient myth and weird folk-lore? "Let fancy her magical pinions spread wide!" Rise and go with me to this "Brotherhood of Venerable Trees." Now watch!

Yonder comes to the forest a timber-expert, inspecting critically these stately trees. What does he see? So much useful timber; or much choice material for those famed musical instruments and the native wooden clocks! He sees what corresponds to the scope of his professional equipment.

Here comes a party of merry nut-seekers: the fruit-quality of prolific nut-bearing trees is all they see.

Now pass a medicine-herbalist and his herb-gatherers; examining tree, shrub, and plant, they seek the drug-values, in bark, leaf, root, flower and seed. These correspond to the seekers' knowledge of medicinal plants and values.

There ride the city-folk, born and bred, hasting through the forest: What see they? Unknown

terrors, haunting the shadows ; the solemn stillness speaks not peace to them. Disliking the weird wilderness, their aversion corresponds to their lack of familiarity with the forest.

There strolls a wandering artist. What does he see ? Lines of strength and beauty in towering pines and massive moss-grown trunks ; soft greys and deep mellow greens, lights playing with the shadows over the bright grass or dancing on reflecting waters. What he sees will correspond to the development of his talent and faculty.

Through the gloaming walk the scientist-lover of Nature and the poet. For them, beauty and interest everywhere ; attuned with Nature's own, their hearts beat delight for the birds and their songs, for music of the cascades, the murmur of the spruces and the sighing pines. Free of prejudices, with open souls responsive, the unfolding marvels—evolution, involution—store their being with overflowing joys : "Nature with folded hands seemed there kneeling at her evening prayer."

Turn now from "the pictures which fancy touched bright," and recall our office-rooms and duties. Morning mail brings letters from patients ; office-hours bring a procession of the sick—of chronic cases, especially, those who come to us as a last chance. Then follow visiting-hours at the bedsides.

Here we face a double correspondence : Vital correspondence of the sufferers to the drug that has power for their cure, and correspondence of our recognition of totality of symptoms to the medicines

which their needs demand, the potencies required, their needful repetition, and our thorough apprehension of *Materia Medica* by which to select the *Similia*.

We have frequent occasion to be grateful to our diligent Master who, precept upon precept, constantly recalled the relationship and correspondences between the picture of the remedy and the disease it will cure.

In a home where the Law of Cure was remarkably demonstrated, the mother was recently cured of a severe tonsillitis by *LACHESIS* 200, in two days. The sickness was contracted from her little daughter, whose cure by *PHYTOLACCA* 200 occupied one day. They were formerly under care of the old school, when similar sickness held them for two weeks.

The father had lately been ill with brain-trouble, and now under *LACHESIS* 10m he was having an aggravation. Called again to attend him, I found himself and all the family made miserable by his groans and lamentations. Said I :

“I would like to tell you a story of a Mr. Lachesis, of South America.

This gentleman never smiled ;

He was quiet, disconsolate, low spirited.

He had a repugnance to society :

If he saw two people whisper together, at once he was suspicious that he was an object of criticism !

His collar felt tight ;

He was cold, still he could not bear the heat.

Frightened by haunting visions behind him.

He said : ‘Please do not let me fall asleep, Doctor,

because after a nap I feel like a whipped dog and wish I might die !

He thought he was in the hands of some one else ;

Thought he was some one else ;

Thought himself about dead, that preparations were making for his funeral." . . . . .

As I continued with the symptoms, the elder daughter could scarce restrain her laughter at the correspondence to her father's case ; he himself began to smile :

"Doctor, will you come to my room ?" said he, and there, confided to me : "That man's feelings are the image of my own !"

"Yes, you are Mr. Lachesis ; you are in an aggravation and will soon be better. Now cheer up, whistle smile, sing and don't make your home seem like a doleful cemetery !"

He replied : "I promise you I will ! I can see from that story that so soon as the aggravation is over I shall be well again."

Hahnemann describes the life of an homeopathic physician as "a conscientious, painstaking system of healing." He was always most enthusiastic on the subject of *Materia Medica*.

Should we be tempted to lessen our time of study, remember Samuel Hahnemann. Homeopathy is itself the result of his marvellous equipment through years of constant intensive study, giving him the faculty, by keen observation, first to perceive through the cinchona-bark that gleam of light which led to his triumphant discovery : *Similia Similibus Curantur* !

—correspondence of law eternal and personal training.

Here is a note of warning and of inspiration from his ready pen : "Indolence, love of ease, and obstinacy preclude effective service at the altar of truth, and only freedom from prejudice, and unfailing zeal qualify for the most sacred of all human occupations—the practice of the true system of medicine."

May the correspondences between this "effective service" given by you Homeopaths, and the beneficent results in your clientage broaden your opportunities for cure and redound to the glory of Him to whom, as each must say, in the last words of the Founder of Homeopathy : "I owe it all."

Not long ago we met a friend who was quite full of a case he had been attending and rather justly proud of it. He was called to see a woman who was insane. She was afraid of her mother, of her husband and of everything else, including the doctor. No symptoms could be elicited. On her mentality our friend gave her ACONITE. On his third visit she was again normal. Whatever the cause the mentality said "ACONITE," and it cured the case. If a return to normal is not a "cure," then what word should be used?—Hom. Recorder.

—*The Homeopathician.*

---

## SWOLLEN CERVICAL GLANDS.

By JULIA C. LOOS, M. D., H. M., PITTSBURGH, PENNA.

INTRODUCTORY NOTE: *This record illustrates the influence of a remedy adapted to the disorder present in the individual child. The pathological tissue developed because of disorder; it quietly disappeared, replaced by normal tissue, when the disorder was resolved.*

Billy J. was in his third year, and had been sick many days when visited : .



Dec. 16, 1914.

Neck swollen on both sides, below ears, past three weeks.

Glands enlarged, 'firm.

◀ on l. side ; r. side ▶, now.

Holds head tipped to l. side.

Constipation ; evacuation difficult.

Pharynx sore.

Swallowing difficult, appears painful.

Strangled taking milk, to-day.

Tonsils swollen.

Eruption called "hives."

Appetite poor.

Vomited milk and mucus to-day.

Face white about mouth and nose.

Picking much at nose.

Respiration labored ; wheezing.

Rests on his abdomen.

Perspiration at times.

Wakens crying, as if scared.

Twitching in sleep.

Emaciation.

CINA lm.

Jan. 25, 1915.

"The glands in the neck are all right. The trouble all disappeared. So many children, hereabouts, had to have their glands lanced ; we are much pleased with the result in Billy," writes the grandmother.

—*The Homeopathician.*

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV. ]

JULY, 1915.

[ No. 7.

---

## HOW TUMORS ARE TREATED?

If you ask any allopathic doctor how tumors are to be treated, he will always unhasitatingly observe that they are to be treated by the knife. Those among them who are rationally disposed and of a scientific turn of mind reply with a certain amount of reservation. They will tell you, so long as tumors do not involve the neighbouring glands and tissues, knife is the only resource.

The young and unscrupulous allopathic doctors always use the knife and cut off the diseased tissues with a hope that thereby they are able to cure tumors whatever their nature may be, either benign or malignant. They don't know or don't think for a moment, that tumors have their origin in the blood and unless that condition of blood is altered or corrected by medicines and by internal treatment, nothing can be done in the way of a perfect cure.

I have had long experience in the treatment of tumors by medicine. In my earlier days I had the satisfaction of curing a bad case of tumor in an elderly lady. I did not know then that actual and permanent cure could be effected by internal homeopathic medicines alone, though I read the homeopathic standard works on tumors. It was decided to have the tumor removed by two renowned allopathic surgeons but the patient refused to submit to an operation. I was called and was able to cure the tumor in the course of three months. Medicines given, as far as I remember, were Merc. sol. and Calc. carb.

This gave me a reputation for curing tumor cases without operation and many cases were given to me. Those who had patience enough and remained long under my care, were cured or benefited. Thus I have gained confidence in treating tumors in the best rational way.

The allopathic doctors have seldom any internal medicine for the eradication of tumors. They cut and when the wound is healed, they have the satisfaction that a genuine cure is performed. They don't know or care to know the after effects of their operation. In most cases, the growth is sure to appear in some other tissues or parts of the body either immediately after or after some time. In my early days of practice a young man of scrofulous diathesis came to me for advice. He had a pedunculated fibrous tumor in the back of his right ear, about the size of a small walnut. I advised him to be patient and take our medicine.

He said he would do so, but after a week he changed his mind and went to an allopath who cured him in no time by cutting off with a knife. Years after he presented himself to me again with such growths in various parts of his body. One in the anal region, of tolerably big size, another in the upper surface of the right foot, another in the back part of the head, near the occiput, of smaller sizes. I explained to him the folly of his former treatment. He was convinced and I treated him constitutionally for a length of time. All were perfectly cured, except the anal one which was reduced to half its size. The man became impatient again and left my treatment. However that was not in any way increased by the cessation of my treatment.

About a decade hence, I was called to treat a European elderly lady for tumor in the left mama. During my examination I was surprised to see that the right mamary gland was absent and on enquiry I was informed that it was swept away by the clean cut of the knife. It was completely extirpated. A year after the growth commenced on the other side. It was a scirrhus tumor and the lady's health was so much deteriorated, that all my attempts were of no avail, she died in a few days. The surgeon who operated must have been satisfied that his attempt to cure the tumor was crowned with success.

A few days ago I was called to see a young man suffering from tumors in the thigh and chest. They were sarcomatous growths. I was surprised to see

that his other thigh was non-existent. I asked and was told that this was amputated (the upper third of the thigh), a year ago for a similar growth there. His condition was pitiable. He was panting for breath, completely anæmic in appearance, his appetite gone, any food liquid or solid was instantly thrown out by vomiting, and he could not rest in any position. The stump of the thigh was thoroughly healed up. Is this a cure? May I ask the operating surgeon?

I can multiply innumerable cases of such irrational practice among the allopathic doctors. But it is useless; they would not listen to any rational teaching. On the contrary when we undertake to treat a case with medicine, they laugh at us and attribute various motives.

Tumors and all growths either benign or malignant, must be treated with constitutional medicines, internally administered for a considerable period.

P. C. M.

---

## CEREBRO-SPINAL MENINGITIS.

It is called spotted fever. It is an infectious disease characterized by an inflammation of the meninges of the brain and spinal cord. There appears a kind of eruption over the body, and hence it is called spotted petichial fever.

In this country we get cerebro-spinal fever in the summer season or properly at the end of the summer when rains set in. Bad hygienic condition and exposure

to intense heat of the sun, are thought to be the causes of this disease. Recent pathologists think that this disease is due to the bacillus intracellularis. The mode of entrance of these bodies is uncertain.

Symptoms of cerebro-spinal fever are in its first stage the same as in common fever, ushered in with chills. There is headache, retraction of head and back, vomiting, frequent delirium and in the end convulsion. Pains are unbearable in the head and also in the back and legs. Head is drawn backwards and there may even be opisthotonos. At last coma supervenes.

Temperature ranges from 102 to 106 or even more. Face is red, veins in the neck are swollen and there is throbbing of the carotids. Pulse is full, hard and frequent. There may be photophobia and strabismus present. Eyes are more or less red and there is puffiness of the upper eyelids. Petechial eruptions appear on the body. In severe cases the eruptions may be purpuric. Deafness is also a common symptom.

At first there is simple twitching of muscles but subsequently convulsion takes place.

The mortality in this disease is very heavy. There are many homeopathic remedies which have a marvellous effect in curing it.

Dr. Lilienthal recommends China and Argent. nit. as prophylactics of this disease.

In the beginning when the indications are clear, a few doses of Belladonna 200 will have beneficial effect. The disease may be cut short with it. Headache,

high fever, spasmodic retraction of head, grinding of the teeth, delirium and mild comatose condition.

Gelsemium comes next in order or in the very beginning of the disease. Loss of muscular strength, constant jactitation, fever not very high, deep soporous condition and perfect loss of strength.

Glonoin is very efficacious when the disease is caused by the heat of the sun. Violent congestion and expansion of the head. Pain in the whole length of the spine.

Veratrum vir.—Face is flushed and bloated, throbbing in the head, headache and vertigo, trismus and opisthotonos. We have got marked effect from this remedy in a very bad case.

Opium did us good in a recent case, where the fever ranged from 100 to 102 F, and where there were bloated and red face, stertorous breathing and coma. Pupils were at first dilated but later on contracted. When the recovery is tedious, Sulphur, Zincum, Calc c., Psorinum and some other antipsoric remedies must be resorted to.

Patient must be kept in bed perfectly quiet. Head should be raised up with a pillow. We don't recommend ice-bag and any other cold application to the head, for that is not only useless but often harmful. Fanning in the head is all that is required to keep the head cool. Urine and stools often passed involuntarily, so scrupulous attention to cleanliness must be enjoined.

Too much overcrowding in the sick room is very injurious to the patient.

Generally the abdomen remains tympanitic, so little food is required. Barley water and cold water are sufficient during the severity of the disease. We should not try to relax the bowels in any way, and must wait till the crisis is over.

P.

---

### Clinical Cases.

P. C. MAJUMDAR, M. D.

#### I.

A Marwari boy of 18 years of age, thin and anæmic, had been suffering from cough and slight fever and dyspeptic symptoms for a long time. He was very anemic and thin looking. After a protracted treatment by Vajdas and allopaths he came under my treatment on the 13th of September, 1913.

Fever usually came on about 3 P. M. with no chill or thirst, only heat and burning of body. Intermission at 10 P. M. with copious perspiration, cough almost dry ; after a prolonged coughing a little white thick phlegm is brought on.

Complaint of pain in the chest when coughing. Bowels generally constipated. No appetite and disgust for food.

Urine frequent and scanty, high colored, occasional nocturnal emission which causes depression of spirit and aggravation of cough.

Mind irritable and dissatisfied with every thing.



The patient suffers greatly during the summer months from the heat, better in cool places. He desires cooling things.

I tried *Nux vom.* and *Bryonia* without benefit. Selenium 30 twice daily cured him.

## II.

Babu K. Dutta's wife, aged about 18, strong and rough built, suffered long from pain in the left ovarian region and bloody uterine discharges. Three months after child-birth she noticed something heavy in the left side of her abdomen and something hard in the lower abdomen.

I examined her and on pressure upon the left ovarian region I found a hard mass about the size of a small orange, which was very painful to touch ; uterus was also enlarged and tender.

There was slight fever in the afternoon. She felt very weak and exhausted. Slight exertion caused palpitation of heart.

Mind sad and there was despair of recovery as she was under allopathic treatment for some time. Fever left her in the morning with copious perspiration.

I prescribed *Lilium Tig.* 3x three times a day and a warm water douche every morning to wash away the uterus.

Improvement was perceptible at once. The mind became cheerful, pain in the ovarian region was almost gone and fever left her.

I continued the medicine for some time and she was perfectly cured in a month and a half.

### III.

I was called by a doctor, who was my class friend, to see with him a case of typhoid fever in a young girl on the 20th of January, 1913.

Fever was very high and the temperature was 105 and up. Red and bloated face, eyes red, and throbbing headache. Full bounding pulse, delirious talks of various kinds. Bowels loose, many stools day and night and the stools were watery, of dirty brown color and of offensive smell. Abdomen tympanitic.

She was very thirsty and only large quantity of water satisfied her. She was somewhat restless, occasionally drowsy.

She was given Baptisia 1x, every four hours, for the last two days, but was not much benefited. I gave her Verat. vir. 3x in the same way the whole day. Barley, milk and whey were given as food. I stopped all and gave only barley water, for I know that food given to such patients is always harmful.

Not much improvement the next day. It was the fourteenth day and there was some aggravation of symptoms. Belladonna 200 four doses in twenty four hours had a good effect.

In short, Belladonna cured the case completely in a week's time.

### IV.

A case of suppressed smallpox at Madhusudan

Gupta's Lane. A young and fat lady, came under my care with fever, pain in the body, sore throat and drowsiness. She was occasionally delirious. I learned that some small eruptions, very much resembling smallpox, appeared over her face and hands.

Fever was not very high but persistent. She was often restless and wanted good quantity of water to drink.

I treated her with Rhustox and Arsenicum both high and not frequently repeated, to no effect. The patient was getting worse.

At last I gave her a dose of Variolinum 200, a few globules dry on the tongue.

The fever was less and restlessness and thirst almost gone.

I gave Placebo, three times a day, for two days. The fever was gone and the lady made a perfect recovery in a few days.

I did not know what the case exactly was but suppressed smallpox might have been the matter with her. I found no appearance of any eruption but the cure was effected by that single dose of Variolinum. This is Homeopathy.

---

## TUBERCULOSIS

NO EXCEPTION TO HOMEOPATHIC LAW,

BY C. H. YOUNG, M. D., BROOKLYN, N. Y.

*The ORGANON of the Science of Homeopathy and the first volume of Hahnemann's CHRONIC DISEASES furnish the instructions for finding the indicated remedy, and the materia medica contains the provings of a*

*sufficient number of remedies to cover, probably, any given case of consumption. Then, as homeopathic physicians possess at least an average medical knowledge, they should surpass in the treatment of consumption as well as in chronic diseases.*

First : The taking of a case, of consumption, correctly requires an intimate knowledge of the precepts of the ORGANON and CHRONIC DISEASES, which must be carefully applied in order to succeed.

Second : The action of the crude drug, or low potency, is too short, superficial, and weak to produce a curative effect in a disease with such changes of tissues, and function, and intensity of action.

Third : The action of a similia, or even similimum in a high potency, is too intense and injurious in its effects, which will start a downward course of the disease, that is, an increase of it very difficult to arrest ; for experience shows that the action of a non-indicated remedy in a high potency is far more deadly than the crude drugs. . . . .

Fourth : The frequent repetition of remedies, especially the high potencies, is confusing and very injurious.

Fifth : An attempt to correct a prior drug-treatment by homeopathic antidotes is a waste of time, and dangerous. Simply discontinue them and at once prescribe *Saccharum lactis*, then carefully take the case, which must, if possible, include :

The symptoms of the primary cold or pleurisy, etc. together with :

Every suppressed symptom, and especially :

The aggravation of time, position, weather, etc., as given by Bœnninghausen. . . . .

The peculiar symptoms of the patient must then be found, as most similarly peculiar in a remedy, in order to make it the unquestioned similimum.

Even after the indicated remedy is apparently found, don't rush to give it, but wait, while you further review the case and remedy, and let the prior treatment subside until the indications are clear and positive. . . . .

The human mind is prone to err, but the Science of Homeopathy with its genuine Law of Medical Therapeutics cannot admit of exceptions in its application to disease ; therefore, the constant problem presented to the physician is :

How to take the case and find its remedy, and after administration :

So to manage the patient that it may not be interrupted ; bearing in mind not only the known average duration of each remedy, but the fact that the different intensities of the same disease in different patients, especially the mental states, will exhaust a remedy in one case quicker than in another. . . .

#### CASE I.<sup>3</sup>

M—, an Englishman, fifty-eight years ; brunette ; negative history. Father died at seventy-four ; mother died at eighty-four. Has a catarrhal tendency,

---

\* \* Much symptomatology and detailed progress is omitted from the author's case reports.

which is sensitive to cold or cold air ; tall and of lean habit.

*Aggravation at sea* : Ars., mag-m., rhus, sep.

*Anxiety* : Ars., rhus, sep.

*Despair* : Ars., rhus, sep.

*Sudden prostration* : Ars.

*Emaciation* : Ars.

*Aggr. cold, open air* : Ars.

*Suppression of sweat by getting cold* : Ars.

*Cough, etc.* : Ars.

*Frothy sputa with yellow mucus* : Ars.

*Right apex* : Ars. •

A further examination of ARSENICUM will show that it is the only remedy in the materia medica which produces the series of symptoms peculiar to both this patient and itself.

Owing to the deadly reputation of ARSENIC I hesitated to give it, as it was my first Arsenicum case of T. B., but as I could not see any other remedy, with faith in the law :

May 3rd.

ARSEN. 200 was given dry,

The fever and sweats ceased within a week ; out of bed in ten days ; out of doors in two weeks, and at the end of a month all symptoms relieved.

Discharged as with disorder thoroughly arrested.

June 17th he called at my office in good condition, well, and had gone into business.

#### CASE II.

Mr. C—, age sixty-three ; blonde.

Diagnosis : Tubercular infiltration of the right upper lobe of the lung, first stage, and obstruction of the aortic valves, probably of an arterio-sclerotic nature.

*Anxiety* : Agar., ant-t., ars., bry., calc-carb., carb-v., caust., fer., kali-c., lach., merc., nat-m., nat-a., pet., phos., psor., puls., rhus., sep., spong., stan., sul., zn.

*Fear of death* : Ars., bry., calc., caust., kali-c., lyc., nit-ac., phos., psor., puls.

*Despair* : Ars., bry., calc., caust., lyc., nit-ac., phos., psor., puls.

*Restlessness* : Ars., bry., calc., caust., lyc., nit-ac., phos., puls.

*Tongue* : Ars., bry., calc., caust., lyc., nit-ac., phos., puls.

*Heart* : Ars., bry., calc., caust., lyc., nit-ac., phos., puls.

*Cough with expectoration* : Ars., bry., calc., caust., lyc., phos., puls.,

*Thick yellow sputa* : Ars., phos., puls.

*Frothy sputa enveloping yellow mucus* : Ars.

The remaining symptoms are also peculiar to ARSENICUM. It was shown that ARSENIC is graded in heart diseases, and it is four in angina pectoris, which is grounded in an arterio-sclerotic condition, so that it is clear that ARSENICUM presents a complete image of the totality of the symptoms or its entire pathology.

Mar. 19, ARSEN. 200

\* The patient progressed steadily toward health and

strength though the pulse continued high, and frequent spells or panics of anxious fretting required a dose of ARSENICUM. He was so fearfully anxious that neither heart-disease nor consumption were ever mentioned.

## CASE III.

Miss—, twenty-three years ; blonde. Mother insane, died of pneumonia ; father died of alcoholism ; one brother sick with tubercle-bacilli.

At five years of age fell and injured right hip-joint, now quite well, though with some soreness, and is a cripple. During the spring and summer of 1911 was in a run-down condition, had a hemorrhage from the lungs in December, and a cough, fever and sweats, with tubercle-bacilli in the sputa.

July 31, 1913.

*Catarrh*, < *draft* : Agar., ars., bell., bry., bapt., gels., caust., chin., hep., kali-c., merc., nat-c., nux, phos., pul., rhus., sele., sep., sul. (R. lung : Ars.)

*Digestion* < *fats* : Ars., bell., bry., caust., chin., hep., kali-c., merc., nat., nux., phos., pul., sep., sil., sul.

< *milk* : Ars., bry., chin., kali, nat., nux., phos., pul., sep., sil., sul.

< *alcoholism* : Ars., chin., nat., nux, pul., sep., sul.

*Anxious* : Ars., chin., nat., nux, pul., sep., sul.

*Hasty* : Ars., nux, sul.

*Depressed and crying* : Ars.

*Eyes lateral motion* : Ars,



*Leucorrhœa* : Ars.

It is seen that the peculiar symptoms of the patient are also peculiar to ARSENICUM only, which is therefore, the similimum.

On October 6th examination showed the right lung clear and respiration normal : discharged.

—*Homeopathic Recorder*, Jan. '15.

---

## HÆMORRHAGE.

Letting out of blood from heart, arteries, veins and capillaries of the body is called hæmorrhage. It is usually caused by the breakage of any blood vessel. Often with great care we cannot discern the torn places. It is therefore that many people conclude that hæmorrhage can take place without breakage of the blood vessels. Blood corpuscles come out of the walls of the blood vessels.

The blood that oozes out in this way, may accumulate in the skin, cellular tissue, mucous membranes or in any cavity of the body. If the blood is accumulated in any hard place or organs, it is called extravasation or hæmorrhagic infarct ; if underneath the skin echymosis.

Hæmorrhage is named according as it takes place in any particular organ, as for example hæmorrhage from nose is called *epistaxis*, if from lungs *hæmoptysis*, if from stomach *hæmatemesis*, from urinary organs *hematuria*, from female organs of generation *metrorrhagia*, &c.

**Causes :—**Hæmorrhage may take place from injuries. From dilatation of blood vessels by pressure of any kind ; from diseased condition of heart and arteries and veins ; from diseased state of the blood, as for instance scurvy, purpura, typhoid fever, smallpox &c. &c.

Certain persons have natural tendency for hæmorrhage from the body. This state is called hemorrhagic diathesis or hæmophilia. In this condition the febrile of blood becomes less and red corpuscles increase.

**Symptoms :—**In acute hæmorrhage circulation of blood is accelerated, pulse becomes full and frequent, the affected part becomes red and hot, but hands and feet are cold. If the discharge of blood is copious and frequent, the patient will succumb quickly ; if not syncope, loss of consciousness and anemia take place. In this state pulse becomes weak, face pale ; slight sweat, numbness of hands and feet, nausea and vomiting, extreme prostration, palpitation of heart, speechlessness, burning of body, restlessness, anorexia, black spots before the eyes, vertigo, tip of the nose and other distant parts of body cold.

**Treatment :—**Prompt measures should be taken to stop the excessive flow of blood at once, keep the patient at rest, in recumbent position. Motion of any kind is injurious. Diet must be carefully regulated. If the hæmorrhage is excessive, nourishing and irritating food must be abandoned. Tea, coffee, spirits of all kinds must be stopped. Light food should be given. Affected parts by injuries must be pressed and cold application should be made to stop the flow of blood.

Hamamelis or Ferrum mur applied externally often has the good effect of stopping hemorrhage. In extreme cases ligature of the affected blood vessels should be resorted to.

**Therapeutics** :—Many homeopathic remedies are useful in cases of hemorrhage.

*Aconite*—Disease from rage or fear ; restlessness, cannot lie in any position ; frequent hemorrhage, blood bright red and forms clots. Young people with black eyes and plethoric constitution are often benefited by Aconite.

*Arnica* :—Hemorrhage from injury ; affected parts become bruised and painful ; head hot, rest of the body cool. Bright red blood ; headache, frequent flooding. Lower potencies must be tried first, failing which higher should be used.

*Belladonna* :—Blood hot and clotted, face and eyes red, head congested. Thirst and chilliness. Aggravation of the disease in the afternoon and at night. Bright red blood.

*Calc. carb* :—It is adapted for plethoric constitution. Lowering of hands, feet and other parts of the body causes aggravation. Blood bright red.

*Carbo veg.* :—Very serious cases of active hemorrhage. Collapse ; requires frequent fanning ; skin cool and perspiring ; anguish about the heart ; pulse small, weak or imperceptible. Higher potencies are better.

*China* :—Buzzing in ears, faintness ; pulse small, irregular and almost imperceptible ; cold clammy

perspiration. Aggravation of all symptoms at night. Try lower potency first, failing which higher must be tried.

We have several times cured very desperate cases of hemorrhage with higher potencies of this medicine. It is also a very efficacious remedy in the after effects of the loss of blood.

*Ferrum* :—Quickness of circulation ; face red ; pulse full. Blood blackish, half fluid and half clotted.

*Ipecacuanha* :—Very efficacious remedy in hemorrhage. Blood bright red. Constant nausea, skin perspiring and cold. Difficulty in breathing, cough and motion aggravate the hemorrhage. Lower potencies are preferable.

*Lachesis* :—Hemorrhage from internal organs. Blood blackish and clotted. Hemorrhage in typhoid fever and ovarian diseases is very promptly benefited by this medicine. The higher the potency, the better.

*Nitric acid* :—It is adapted to uterine hemorrhage. Pain in the loins, vomiting and purging of blood.

*Sabina* :—Uterine hemorrhage of bright red color and clotted. It is a wonderful remedy in hemorrhage in abortion. Lower potencies should be used.

*Secale cor* :—Veinous, black blood, not much clots. Blood disintegrated and fluid. Hands and feet cold ; burning of body, cannot keep covering on body.

Hemorrhages of all kinds are very quickly controlled by homeopathic remedies. Indications of remedies are clear cut ; there is not much difficulty in finding out the similimum.

Care must be taken to repeat the medicine. As soon as perceptible improvement is noticeable, it is always better to stop the medicine and watch the effect. If there is not entire stoppage of hemorrhage, the indicated medicine last given, must be repeated less frequently. In case of failure with the lower potencies, higher ones should be tried before taking leave of that medicine.

P.

---

### A FEW WORDS ABOUT HOMEOPATHY.

A century ago the world renowned Samuel Hahnemann, a native of Germany, discovered the science of Homeopathy. From that time it has undergone various sorts of perversions, checks, hinderances and difficulties ; still it is and it will be for the good of human beings ; for truth is to live and to endure. There must be a soul of truth in all things that Nature ever gives harbor to and had the science been spurious, had it been a miserable piece of quakery and dupery, it would have gone to the back ground by this time. But what has been the case ? It has spread its effectual and luminous wings all over the world and has been gaining ground day after day. Why so ? Simply because it stands on the rock of science.

In America, where men of erudition and culture are numerically superior to those in other parts of the world, cure by Homeopathy has attracted the best

attention of the people and it is by their patient endeavours and arduous research the science has ushered in a new era of eternal peace and happiness for the diseased and accursed humanity. It is after all a pleasant news to us all and I think every other therapeutics shall have to succumb to and recede before it, sooner or later. In our part of the world homeopathic treatment is not unknown ; but it is regrettable that people are not being benefited by it outside the skirts of Calcutta or the like towns, where immediate help of veteran and well versed homeopaths are available. In the mofussil and the rural areas quacks, eager to earn lucre, without a bit of knowledge in pathology or medicine, do abound with homeopathic boxes, ready to diagnose disease and administer medicine to the unfortunate patients. Their superficial knowledge and lip-dip assertion coupled with the disbelief of the people, are more than enough to mar the miraculous effects of homeopathy.

On the other hand, our allopathic confreres often manage to forget their covenant to relieve the suffering populace and discard the plain truth, the science, only for the sake of pecuniary gain. But in the duel the kind mother Nature always gives the palm of victory to truth dispelling the professional antagonism. Thus the cloud of disbelief is gradually rolling away, the habit of looking askance at the science and its curative potency is being forgotten and in a near future men must live and stand by it ; for truth is always the prop and support of human society.

Some suppose that homeopathy is efficacious in such diseases as diarrhœa, cholera, several female diseases at the time of conception and pregnancy and so on ; but it is quite ineffectual in bronchitis, pneumonia, broncho-pneumonia, typhoid and other diseases with obstinate and refractory symptoms. This belief, though wrong, is due to want of experts in the science and the abundance of quacks and their wrong selection of medicine. Where there are well-trained homeopathic practitioners, this disbelief is disappearing quickly. People see that homeopathic healing art is as admirably efficacious in cholera and other diseases as it is in other complicated diseases when treated by the well educated physicians. Hence people are getting attached to it daily in increasing proportions.

The more difficult the disease, the more the symptoms it has, the more complicated it becomes, the greater is the curative influence exerted by the homeopathic medicine. Where proper Kavirajee or Allopathic treatment has failed and where the patient shows no symptoms of death, but the disease continues in a bad type, a dose of homeopathic medicine has often been found to achieve a marvellous success—this is a proved and demonstrated fact. This wonderful efficacy of homeopathy has compelled allopathic practitioners and Kavirajes to take recourse to Homeopathy.

There is a common belief that homeopathy cannot cure fevers acute or chronic, and when it does, it takes a very long time ; but the very idea is absurd. When

it is the best curative for cholera—a virulently dangerous and deadly poisonous malady, it is then foolishly absurd to say that it cannot do away with fever, the chiefest and commonest of all the diseases. In fact whenever a disease becomes serious, fever paroxysms always appear. In homeopathic treatment the same medicine is more or less specific for some kind of fever or other with different symptoms and deverse nature. Whatever symptoms might exist, whatever might be the nature of the disease, one single medicine is to be prescribed and administered at a time. This selection of medicine in complicated fever cases is a very difficult matter and might stagger a novice in the field. Unless and until a physician has a full mastery over *materia medica*, he cannot be expected to cure the patient. Those who have the patience and curiosity to see the eminent Calcutta physicians treating fever cases and obtaining excellent results by their skiful treatment, have been utterly astounded and have nothing to complain against the science.

Homeopathic medicine is a reliable recipe and sovereign remedy for all kinds of fever, acute or chronic or malarial, with or without enlargement of the spleen or liver, and even for chronic diseases with fatal complications. To epitomise I should say that it is the best, safest and most reliable cure for all sorts of maladies, especially for malaria, the terror of Bengal. It very often successfully combats the low type chronic fever that defies quinine, arsenic and other febrifuges and all cases of malignant and persistent types yield to its



magic power. Besides, it does no harm to the patient owing to the smallness of its dose and the relief obtained is prompt and permanent. The taste of the medicine is neither pungent nor bitter, therefore a patient under all circumstances can easily use it agreeably. Unlike other treatment, medicine is not to be continued long after recovery. As regards food no strictness is to be observed.

A patient regains his former strength and energy soon after he comes round and the health is fully re-established in no time ; for the medicine is possessed of the potency of rapidly renovating and re-building the prostrated system and shattered constitution, thus saving time and money and giving people opportunity to follow their usual avocations within a very short time. Hence it is a good news to the peasants of Bengal. By the bye, I should say that we do not dislike the practice of using quinine in very moderate doses in malarial fever, but that quinine is *the remedy* for all fevers of all descriptions, we cannot admit.

DR. TARAK BRAMHO MUKERJI, Birbhum.

---

### Notes.

The summer this year is very troublesome in the neighbourhood of Calcutta, but rains are early and plentiful. There is not much sickness in our fair city.

- Our veteran homeopathic physicians Drs. D. N. Rôy and P. C. Majumdar, after their summer rest

in the regions of the Himalaya have returned to town and resumed their practice.

Our Calcutta School of Homeopathy is now open for the new session. Lectures in all the subjects are in full swing. Special feature of this oldest institution this year is that it is placed in connection with the Calcutta Homeopathic Hospital where the senior students will get ample opportunity of receiving clinical instructions.

Lectures on "Organon" by Dr. D. N. Roy and Practice of Medicine by Dr. P. C. Majumdar are regularly attended by senior students. Dr. J. N. Majumdar's lectures on the Materia Medica and Dr. G. L. Gupta's lectures on Therapeutics are of special interest.

Malaria is still ravaging the country with fearful invasion. All investigations on this subject by our Government officials are futile to cope with. They know no more than mosquitos as productive agents and quinine and quinine alone, as protective and curative in this disease. This has been done repeatedly, but without effect.

Our friend and colleague Dr. Bepin Vehari Chatterjie has been suffering long from weakness and insomnia. He was also in the hills and is now much better. He has returned to the town shortly and resumed his practice.

We are sorry to see some of our homeopathic

physicians of this city going to Darjeeling and other places and there displaying placards and advertising themselves in the public streets. They are generally ridiculed by the public for their unworthy behaviour as qualified doctors. They ought to know that this kind of advertisement is unbecoming of a doctor and prejudicial to their reputation. We warn all our homeopathic physicians to refrain from such procedure.

Our Calcutta Homeopathic Society is in arrears for two months by the absence of most of the members for summer outings. We hope it will be soon remedied.

*Salvarsan cure.* Things like these come and go but not without much mischief. Salvarsan is a new invention of the allopathic doctors. We have seen much damage done with this medicine. In a recent case of ours—a young man from Persia took Salvarsan and a host of new symptoms appeared. With great difficulty we have been able to eradicate these untoward symptoms.

Mental symptoms are anxiety and restlessness, fear to go out alone, hopelessness of cure and fickleness of mind.

*Tetanus.* We learn from newspapers that there have been many deaths from tetanus in the German Army, and that even the antitetanic serum seems to fail as do other means. If these men used good homeopathic tincture of potencies of *Hypericum*, "the arnica of nerves," they would have

much better success, both in prevention and in the cure of the illness.—Homeopathic Recorder.

*Fever.* Some cases of catarrhal fever are cropping up in this season among great many of our people here. The ordinary cases are cured promptly by a few doses of Aconite or Rhustox.

---

## THE ELECTRON THEORY AND HOMEOPATHIC PREPARATIONS.\*

BY WILLIAM H. DIEFFENBACH, M. D.,

NEW YORK CITY.

But a few years have elapsed since the atomic theory, upon which the splendid structure of modern chemistry was erected, stood unchallenged and unrivalled. Within the past decade, however, an entirely new conception of the composition of matter has been evolved, tested, and found physically perfect, the theory of the electron. This theory does not displace the atomic theory, it merely amends it, and chemical science has not been marred but improved and developed through this new hypothesis.

An electron is conceived as a central positive particle around which, as in the solar system, a mass of negative particles are held in attraction. When these negative particles become detached, or are freed through friction, induction, heat or chemical action

---

\* 'Read before the Bureau of Homœopathy, A. I. H., 1914.

and flow along a conductor, the manifestation of electricity is created.

Electricity, therefore, has now been shown to be a stream or collection of freed electrons, flowing along a conductor. When the electrons vibrate the ether, the various manifestations of physical force ranging from Hertzian waves and wireless telegraphy to the short waves of the Roentgen ray and radium are created. The manifestations of heat and light are but various degrees of vibration of the ether of these electrons.

The discovery of radio-activity, especially Madame Curie's work with radium, has fully demonstrated that smaller particles exist than the atom of hydrogen.

We now know that the atom of hydrogen is a mass, being composed of one thousand electrons, and that it is this exact number of little maelstroms or vortices which furnishes the hydrogen individuality or property. We know that the carbon atom contains twelve thousand, the calcium atom forty thousand, the zinc atom sixty-five thousand, the iodine atom one hundred and twenty-seven thousand, and going upward to the higher atomic weights, that the radium atom has two hundred and twenty-five thousand electrons. We now know that many of the elements of high atomic weight are in a state of slow disintegration, their atoms giving off electrons with coincident manifestations of physical phenomena and transmuting into other elements.

These statements would prove that the atom as such, has lost its significance as the unit of matter,

and also suggest the probability that carbon, graphite and diamond, although chemically composed of atoms of carbon, achieve their individuality through some special change of the electrons in the atomic structure of the carbon.

Several points should be emphasised in relation to these prefatory remarks :

First. For over one hundred years, in spite of ridicule, the homeopathic profession has maintained that charcoal, chalk, silica, lycopodium and other, supposedly inert substances, can by succussion and trituration be rendered medically active.

We now know that an atom of calcium contains forty thousand electrons, and it can readily be conceived that in the finer division and dilution of supposedly inert substances these electrons can be freed and their forces utilized.

To sneer at reasonable potencies such as the sixth or thirtieth gives evidence of lack of information of the trend of physical research. Acceptance by the scientific world of the electron theory must go hand in hand with the acceptance of the scientific correctness of the utilization of reasonable homeopathic potencies. And the physician who in the year 1914, still denies medical virtue to minimal dosage of remedies should be sent to school.

#### Discussion.

*Dr. Thos. H. Carmichael, Philadelphia :* Dr. Dieffenbach's paper admits of brief discussion. It is full of interest, in that it suggests the *rationale* of our attenuated remedies. In the past we have been

satisfied with the fact that if properly indicated they all act. Now, science tells us why. Electron disassociation and electron theory is its successor. The world has been forced to admit the value of attenuations. The idea of the necessity of a material dose received its first setback with Koch's tuberculin, and many were killed before it was properly attenuated. When that attenuation was found to be between the 6th and 7th, the ridicule of homeopathy ceased. In 1898 E. H. S. Bailey, professor of chemistry in the Kansas University, read a paper on "The Proof of the Law of Similia from the Electro-Chemico-Physiological Standpoint." His concluding sentence was, "Just why these particles, with their peculiar electrical conditions, should act on the system therapeutically, in such a way that like cures like, we may not be able to conceive, but we can understand that in this condition, more than in any other, there must be a state of energy, such as is most favorable to absorption and to subsequent therapeutic action."

In 1903 transactions, Dr. Gatchell called further attention to this subject in a strong paper "On the Mode of Action of Drugs in the Crude Form and in Dilute Solution, with an Attempted Interpretation of Hahnemann's Theory of Dynamization."

What is the practical point? There are probably two: The first is that, from a therapeutic consideration, advantage is to be derived from dissolving our powders in water, which favors electrolytic dissociation, and also that the old fashioned powder spread over the moist tongue is better than the tablet swallowed immediately. A second practical point is that it eliminates the idea of the necessity for material doses of a drug in order to produce therapeutic results.

*Dr. Guy B. Stearns, New York City:* I wish the discussion had been carried a little further to show the amount of power generated in the transformation of the radium. It is supposed that radium, in the process of disintegration, is carried in lower series of weights until its ending place is 206. An enormous amount of energy is developed. A gram of radium generates or develops enough power to equal 118 calories of heat or energy in an hour. If you transfer this into food value, you have enough energy

supplied by one gram of radium to sustain a person for at least twenty-five hundred years. If this were expressed in another way, that amount of radium manifests enough energy to lift the largest Dreadnaught to the top of old Ben Nevis—a matter of lifting twenty-six thousand tons to a height of forty-four hundred feet. If this amount of energy is developed in dropping from 226 to 206, you can imagine the amount of energy inherent in the 206. Even that does not mean anything compared with the amount of energy in the intangible part of our universe in universal ether. We think of matter as being dense, but it does not in any way compare with the density of free universal ether. You would have to compress a thousand tons of matter into a 1-25 inch cube to have the matter correspond in density with ether. Or, giving figures in another way, there is enough energy in a cubic millimeter of ether to run a million horse power engine for forty million years without stopping.

*Dr. O. S. Runnels, Indianapolis :* It is a great satisfaction to know just what electricity is, and to know that it is a stream of ions. Now, if Dr. Dieffenbach will inform us what ions are, I would be very much obliged to him.

*Dr. John L. Moffat, Ithaca, N. Y. :* I am not up-to-date, I fear. Sometime ago I read that in studying and analysing the negative electron, its energy accounted for it all, leaving no data (weight, etc.) to show the presence of any "matter" in addition to that energy. Am I wrong in this? The materialistic mind can conceive the electron only as an ultimate particle of "matter" charged with an ultimate unit of electricity (energy). The vitalist accepts the electron as an ultimate unit (focus? vortex? whorl?) of energy, and therefore that matter is not an entity distinct from energy. Personally, this has for years harmonized my conceptions of the universe and of creation.

*Dr. Runnels :* I infer we know nothing about matter except as it is energized by force. The whole universe is force. The force is the thing—the energy.

*Dr. Dieffenbach* (closing the discussion) : The conception of the electron is that of a central positive particle around which, as



in the solar system, revolve, in a constant state of activity, these negative particles held according to the law of attraction and repulsion. If we have these in the state of equilibrium, no force is generated. In an atom of hydrogen there are 1,000. If heat or friction is applied, or some chemical action, these inactive electrons are freed and they float and agitate ether. If, instead of agitating the all-pervading ether, they flow along a copper or silver wire, we get the manifestations of the direct current that lights our rooms and can be utilized in various ways. Electricity, therefore, is supposed, according to the latest ideas, to be a negative charged conductor and can be modified and changed into the various currents—to control these electrons. That is the theory, and the theory fits in with all known facts. There is not a physical test made by the greatest professor in physics in which the theory has been found to be wrong. It does not change the atomic theory—it merely amends it. The atom is the chemical unit, but not the unit of matter, for we know the atoms are composed of different numbers of these electrons. As stated, we have 40,000 in calcium, 200,000 in lead, and 226,000 in radium. In the high atomic weights we have the greatest number. In thorium we have 238,000. In these high atomic minerals the number of electrons is so great they are constantly bursting out, and as they are thrown off, they produce various disturbances of the ether, and we get the various manifestations which we now recognize as the different rays—the alpha and beta ray—and these set up the gamma, which is very similar to the x-ray of the Crookes tube.

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV. ]

AUGUST, 1915.

[ No. 8.

---

## SYPHILIS.

Hahnemann justly classed syphilis as one of the three miasms of his Chronic Diseases. We can very well say that nearly half of all the diseases and sufferings that the human flesh is heir to, is due to this malady, one of the curses of human existence. Before the days of Hahnemann, syphilis did not receive much careful consideration at the hands of medical men and mercury was the great panacea for all forms of the disease, and we know that the treatment was very often worse than the disease itself. Later came the Iodide of Potassium treatment for syphilis and until very recently, they were the only two remedies that were considered to be sufficient for the treatment of this dire disease in all its stages and manifestations.

But Hahnemann created a new era in the treatment of this malady. He prepared the soluble mercury and administered the different preparations of

this drug in such minute doses and in the potentized form that although they retained all their curative virtues, they were bereft of all the injurious effects. He also found various other remedies that were equally potent, if not more so, in checking the ravages of the disease.

It has been held by various authorities that if the sore can be cut out immediately after the infection in the primary stage, before it has had time to affect the general system, the disease can be rooted out in its entirety and thus syphilis can be aborted. In the May (1915) number of the New England Medical Gazette appears an article on the aborting of syphilis by Dr. C. G. Rogers of Seattle, Washington. He is of opinion that electric cautery is the best and safest treatment of syphilis in its initial stage. He says :—  
“Clinical observations extending over a period of eleven years have proved that if primary lesions of syphilis are treated during an early stage in their development, general spirillosis may be easily and quickly prevented. There may be exceptions to this rule, but in a large number of cases none have been observed. It is admitted that the primary lesion is the result of spirochetic invasion. During some form of contact germs are transferred. The period of incubation is the time required by the transferred germs to reproduce in sufficient numbers to accomplish the destruction of the epithelial cells so the eye may detect an erosion, which marks the beginning of the period of the second stage of incubation.

As the colony increases in numbers the surrounding tissues are occupied, and the erosion takes on a more marked appearance of ulceration, which rapidly deepens. As the colony extends, involving the tissue surrounding the ulcer, induration follows the invasion until, joining beneath the ulcer, it forms an indurated base, the development occurs very rapidly.

After a sufficient increase in numbers, the movement towards further organismal infection is commenced. This state of the invasion is conducted through the lymphatic ducts, and one or more of those leading from the gland or glands nearest the ulcer will usually show evidence of inflammatory action. There will be redness, tenderness and sometimes marked induration along the course of the duct. In many cases progress of the invaders may readily be observed. This shows invasion is accomplished through lymphatic—not sanguinous—routes. Any degree of systemic infection present before the commencement of the general invasion is not microbic, but due to toxins generated by the parent colony."

After thus writing about the different stages of the disease, the diagnostic and prognostic value of the Wassermann test is considered and then the writer passes on to its treatment. He says :—Clinical experience has abundantly demonstrated that by rapid destruction of the germs at this time the disease will be aborted.....when destruction is complete, all evidence of induration will immediately disappear..... If cauterization of the initial lesion be effected by

powerfully penetrating rays of light, the whole colony will be quickly destroyed." He concludes by saying "Cauterization must be thoroughly accomplished. It must be sharp and certain and include all infected tissues. The whole field of induration—including the base—must be destroyed. A slowly cooking process will rarely succeed. Cauterize fearlessly."

These are of course very good instructions and if properly carried out will no doubt yield excellent results. But very often it becomes a very difficult question to find out how far the infection has spread and as the writer truly observes that unless the cauterization is thorough and complete, failures will result. Now in the homeopathic materia medica we have a number of remedies, which, when properly selected, yields equally prompt and excellent results. Moreover, they do not take cognizance of the fact whether the sore is in its primary stage or if there has been any systemic invasion. If the indication for the homeopathic remedy is clear, the cure will be effected regardless of the stage of the disease, the involvement of the glands &c. In the Soluble Mercury of Hahnemann, in Hepar sulph, in Nitric Acid and in a host of other remedies, we have a cure for syphilis like that of any other disease, that is quite permanent in its effects and satisfactory in its results in every way.

I shall now deal with another paper that appeared in the journal of the American Institute of Homeopathy by Dr. Walters of Boston, for it throws much light on the modern methods of treatment of this disease

not quite homeopathic but very interesting and instructive. As I have always said, I reiterate here once again that as homeopaths, it is true, we have a materia medica that enables us to treat and to cure most difficult ailments but at the same time it is absolutely necessary that we should keep abreast with the modern improvements of science and watch carefully all the advances and discoveries that are taking place in the great field of medicine.

Dr. Walters observes :—"The question of syphilis and its treatment has always been a very important one in the practice of almost every physician. Apart from its sociological aspects, however, it is one that has been largely under the ban in scientific medical assemblies. This has been on account of the actually very vague knowledge concerning its cause, its accurate diagnosis and its proper treatment."

We have already dealt with the etiology of the disease. Now we shall consider its so called accurate method of diagnosis and its treatment. According to Dr. Walters patients suffering from the disease are now admitted into all the general hospitals and there efficiently treated. In other words the disease has been elevated from its lowly station where mercury and the iodides were prescribed in a hit-or-miss manner to a higher plane where its progress can be accurately watched by exact laboratory methods and the efficiency or further need of various forms of treatment can be definitely determined. In short, syphilis can take its proper place in scientific medicine. Now let us see

what this scientific treatment is. The writer says :— until recently there were two remedial agents mercury and potassium iodide. A patient received sometimes the one and sometimes the other. If he showed signs of improvement, well and good. If not, there was practically nothing further to try and only too often he fell into the hands of charlatans. Thanks to the researches of Ehrlich, a remedy is now available that will compare favorably in efficiency with quinine in malaria. Of course by this is meant the salvarsan treatment. He also mentions neo-salvarsan, a later production that has been introduced into the market on account of the failures of salvarsan. Dr. Walters is an advocate of salvarsan in preference to neo-salvarsan. Now then according to these doctors there is no other treatment but the administration of salvarsan in various forms and ways in all the stages of syphilis—namely the primary, the secondary and the tertiary and in all their varied manifestations in the different tissues and organs of the body. What about the many homeopathic remedies recommended by our seers in our text books and materia medica? Are they of no avail? Or has the doctor no experience about them or does he think that those were written by charlatans! God forbid that I should think so. May be, the doctor has no experience or no knowledge of them and so needs must fall back on the vaunted armamentaria of a single drug of our friends of the other school. I ask these questions because I find that this paper was read before one of the meetings of the American

Institute of Homeopathy and many doctors took part in the discussion that followed and I regret very much that among them are not mentioned the many valuable remedies that we have in our *Materia Medica*.

A few words about the Wassermann reaction and I will pass on to the homeopathic treatment of syphilis. It cannot be gainsaid that since the discovery of the *treponema pallidum*, the Wassermann reaction has become a valuable adjunct in the correct diagnosis of syphilis. Of course there are limitations. We know that in the primary and tertiary stages it is often negative. In the secondary stage it is almost always positive. With us the Wassermann test is of importance in diagnosis and prognosis. With our friends of the other school it is of importance in treatment also. It is not an absolutely specific complement fixation test as is that used in gono-coccus infection. In this country Lt-Col. W. D. Sutherland and my friend Dr. G. C. Mitra wrote about the Wassermann reaction in Malaria, Kala-Azar and leprosy which is also very interesting. It might be stated here that the experience of Lt. Col Sutherland and Dr. G. C. Mitra in the Wassermann test is vast, as Dr. Sutherland is the Sefologist of the Calcutta Medical College and Dr. Mitra is his assistant. "In 1909 the question of the results obtained when testing the blood of malarial cases by means of the Wassermann reaction began to interest the medical profession. After quoting various workers in this department the doctors conclude thus :—In view of these various



findings it seemed necessary to determine what interference if any, malarial infection exerts in cases examined here by the Wassermann reaction. Accordingly we asked aid from the physicians in charge of wards in the Medical College and Campbell Hospitals, Calcutta and have been fortunate enough to secure the blood of 50 cases in which malarial parasites were found to be present in the peripheral blood at the time when their blood was taken for a Wassermann reaction.

The results were as follows ;—

				Cases	Positive W. R.
Benign Tertian Parasite	...	...	...	32	7
Malignant	...	...	...	17	2
Both varieties	...	...	...	1	...
				50	9

We were able to examine the blood of 38 cases of Kala-azar. In all of these the parasite had been found, by careful and competent observers, in smears taken from splenic material obtained by punctata. Of the 38 cases 10 gave a positive and 28, a negative reaction. Of the 10 positive cases only 2 gave a more than slightly positive reaction. With regard to leprosy ? after quoting various authorities the doctors observe :—“We have been able to examine the serum of 34 cases of undoubted leprosy of which 32 were inmates of the leper asylum at Purulia, 14 were of the anæsthetic form ; of these 4 gave a positive and 10 a negative Wasserman reaction. Of the remaining 20

7 gave a positive and 13 a negative Wassermann reaction. Thus it is observed that the Wassermann reaction is influenced in various ways by various other diseases that may be present in the blood of patients examined for the Wassermann reaction. So we conclude that while the Wassermann test is a valuable adjunct in the diagnosis of syphilis, neither the positive nor the negative reaction is conclusive proof of the presence or absence of syphilis in a particular case.

The treatment of syphilis according to the homeopathic method is eminently successful. I have been able to cure many a case in the primary stage by the administration of a few doses of Mercurius sol in the 6x potency ; when the disease is a little more advanced and the glands in the inguinal region become involved, the iodatus does good work, also in the lower potencies. If the suppuration is extensive and the bubos also tend to suppurate, we think of Hepar Sulphur. What a grand remedy Hepar is, it is difficult to say. I have been able to cure infants suffering from hereditary syphilis by the administration of this remedy alone. But of course these cases take time. One case was under treatment a year and another about 14 months. They are both healthy boys now. I have treated many cases of this kind.

Acid Nitric is useful in phagedenic chancres where the ulcers are inclined to spread superficially.

We have medicines to cope with all the different stages of the disease in all its various manifestations.

Luticum is a grand remedy to relieve the excruciating agonizing pain so characteristic of the disease.

For the primary sore we think of such remedies as Merc Sol, Hepar sulph, Nitric Acid, Arsenic and Sulph.

In phimosi and paraphimosis we think of such remedies as Hepar sulph, Cinnabaris, Rhustox, Apis, Thuja and the like.

In the secondary and tertiary stages Arum, Asafoetida, Arsenic, Kali iod, Hepar s, Kali bich, Fluor Acid, Lachesis, Mezerium, Stillingia, Thuja and Sulphur.

In affection of the bones Asafoetida, Aurum muriaticum, Fluor Acid, Calc carb, Mezerium and Stillingia I have found very useful.

If it affects the mucous membrane, I generally think of such remedies as Aurum mur, Nitric Acid, Hepar sulph, Kali iod and the like. I have cured two or three cases of syphilitic nodes with Kali iod after several other remedies failed. Of course these cases take time. We are sometimes able to cure and often to relieve syphilitic iritis with the indicated remedy. Bryonia helps us often in this condition, and so do Hepar, Kali iod and Cinnabaris.

It is of course very disheartening to find members of our profession running for the salvarsan, the mercury and the iodide treatment in syphilis to the total disregard of the valuable armamentaria that we possess. I have seen most eminent men in Calcutta

extolling salvarsan to the skies a few years back, running it down today in the strongest terms. As quinine is no panacea for malaria, so salvarsan is no specific for syphilis. It may cure individual cases. Every case needs careful study and selection of the remedy.

J. N. MAJUMDAR, M. D.

---

## ARGENTUM NITRICUM (AG. N).

By JOHN H. CLARKE, M. D., London, England.

CLINICAL.—Acne (Syphilitic).—Diabetes, Duodenal ulcer. Dysentery. Hæmorrhoids. Lumbago. Mucous colitis. Neuralgia, supra-orbital. Oesophagus, spasm of; stricture of. Spermatorrhœa. Uterus prolapse of.

CHARACTERISTICS.—*Ag. n.* was first prepared by the Arabians. Introduced into practice by Paracelsus. After the short proving of the 15th centesimal by Hahnemann (1813), it was not proved until Dr. T. O. Muller proved it, and published one of the most learned treatises in medical literature in 1845 in the *Austrian Journal* under Watzke's editorship" (Hg.). Many provings have since been added. There are two errors in the text of the *Dict. Mat. Med.* P. 165, line 7 from bottom, "spots" should read "spot"—"small spot between xiphoid and navel," etc. P. 167, line 11 from top for ">" read "<"—"Cough <evening and night." In the introductory part of my article

(p. 162, l. 2) I have this remark "In allopathic practice the dyspepsia for which *Ag. n.* is given is < before food when the stomach is empty. The opposite condition is the leading indication in homeopathic practice." *Ag. n.* in fact, has both > and < by eating. "Eating > nausea, but < stomach pains." — "Pain in abdomen as if sore ; with great hunger ; > after eating but a trembling sets in in its place." This last strikingly suggests the "hunger pains" of duodenal ulcer, and I have given *Ag. n.* with great benefit in such cases. Again, "giddiness > after dinner is another *Ag. n.* symptom, and I cured rapidly a case of vertigo, which was > after lunch in an old man who had suffered from lightning pains for many years. *Paraplegia* very strongly calls *Ag. n.* to mind. I cured a very bad case of post partem paraplegia with *Ag. n.* 5. In *Homœopathic World*, Jan., 1909, I have recorded this with a number of other cases. Brewer's proving of *Ag. n.* brought out symptoms referred to the prostate gland. The following case illustrates this clinically : Man, 63, sanguine temperament, light eyes, who had warts on left forehead at hair margin, had enlarged prostate with difficult micturition. "Too frequent desire to urinate ; sensation as if there was too little space for the urine to pass." The symptoms of the proving are "Urethra feels swollen ; inability to pass urine in projecting stream." *Ag. n.* 3x twice daily removed all the symptoms. Some of the provings of *Ag. n.* were truly heroic. A student, 22, took 1x trit. as much as would cover the

point of a knife each evening on returning. There followed a graphic picture of the drug's action:—metallic styptic taste, like ink, immediately ; dizziness before falling asleep ; restless sleep ; dreamful with much tossing about and frequent dazed waking ; woke early in morning with flatulent rolling and rumbling in bowels, and sensation as if he must go to stool. Three diarrhœic stools at short intervals, the first papescent and copious, the other two scanty and of watery mucus, dark and fetid. Does not relish the usual breakfast ( coffee and milk ). The whole forenoon his limbs feel very weary and debilitated ; as after a long journey. with great feeling of illness, dread of labour, drowsiness, chilliness ; does not look well. No appetite ; frequent rising of air. Feels chilly all over in evening ( in the room ). After 2nd dose. diarrhœa in night ; six liquid brown fetid stools. Sweat with chilliness as soon as he got warm in bed. After waking, painful confusion in forehead ; this disappears after retiring—wearily debilitated, no appetite. Slimy tongue ; the papillæ are enlarged, and on eating sore aching like a sore. Looks very old. Frequent emission of pale strong-smelling urine. Urine continues to drop out after the micturition is accomplished, with sensation as if the urethra were swollen. After 3rd dose drowsiness and tossing about in night but no sleep. Palpitation. Sweat towards morning. Tremulous weakness in daytime accompanied by general prostration and apathy. No appetite ; food tastes like straw. Weakness of lower extremities persisted some days after the proving.

This was one of Dr. I. O. Muller's provers. The symptoms are all characteristic. Another of Muller's provers, man, 32, who took a like dose had : a bitter, metallic, astringent taste "as of verdigris" causing nausea and retching ; could not get to sleep for fancies and "images hovering before him" ; then dreamful half-slumber for first part of night ; scarcely had he become quiet when he had to go to stool, with slight colic ; he had *sixteen greenish fetid mucous discharges* during the night which went off with a quantity of noisy flatulence. Great debility in daytime, even to exhaustion ; *lumbar region felt as if beaten to pieces*. *Papillæ about left margin of tongue became erect in the shape of erect reddish, painful pimples : the tongue pained as if burnt* ; fauces and œsophagus felt burning and parched.—These provings have given keynotes for the use of the remedy. Guided by this symptom "*Abundant prominent papillæ on the tongue, especially at tip*," W. S. Searle (N. A. J. H., April, 1871) cured with *Ag. n.* 3x a young married lady, who had had several miscarriages and still-births and was evidently syphilitic, of a terribly disfiguring acne of the face, menorrhagia, with grinding, twisting ovarian pains extending to back and down thighs ; ceasing entirely at night and recurring at a varying hour in the morning and lasting all day ; leucorrhœa and albuminuria. Under the remedy all vanished like a mist.—The *green stools* of the above proving have provided another keynote. Frank Kraft (Cleveland, *Med. and Surg. Reporter*, June,

1907), tells of a case of nightly colic with frequent discharges of green spinachy stools in a nursing infant, traced to over-indulgence in sweets on the part of the mother. The mother received *Ag. n.* and the baby was cured. Kraft gives the three distinctive colours of *Ag. n.* as *green*, *blue* and *black*. "The teeth get *black* easily, Sores about the body may take in a *black* edge ; the tongue though thickly coated with white, may be *blue* and hard and dry ; whilst *green* is the most characteristic colour of the stools. This will often distinguish it from *Fer.* in "diarrhœa < from drinking." Both have "fluids run through him," but *Ag. n.* stools are green. But the stools of *Ag. n.* are not exclusively green. Bloody mucus and shreddy membranes point to the condition called "mucous colitis." I have found it of great use in many cases, particularly where there is distress in the left hypochondrium.—S. Van den Berghe (*Homeopathic World*, Jan., 1809) records a characteristic case of *Ag. n.* diarrhœa in a school-boy of 7. There was complete loss of appetite, no thirst, a soft stool on rising. Subsequently the condition grew worse, the stool coming at 5 or 6 a. m., and followed by another immediately before he departed for his class. Then the stools became more frequent and were mixed with bloody mucosities of epithelial *debris* sometimes *greenish*, always urgent and accompanied by noisy flatus driven out with force. Occasionally the stools were involuntary. The discovery that the boy had an *extraordinary appetite for sweets* before his illness came on led to



Ag. n. 6 being prescribed, and a rapid cure resulted. But school-fight had doubtless as much to do with this case as the sugar and thus Ag. n. was doubly indicated. Van den Berghe also cured a case of nocturnal enuresis with Ag. n. in a boy of 10 who was *inordinately fond of sugar*.—In the case of the first prover alluded to above, the weakness of the lower extremities persisted after all other symptoms had disappeared. In paraplegia from exhaustion, from concussion, from alcoholic excess ; hysterical and diphtheritic paralysis, and in spinal sclerosis Ag. n. has a place according to Kraft. A characteristic concomitant of Ag. n. symptoms and ailments is *lassitude and trembling of the limbs*.—The second of the two provers quoted above had a cough : “during the day dry tickling larynx inducing cough ; several turns of dry hacking cough.” After 4th dose,—“paroxysms of dry cough at night, sometimes so violent that it induces vomiting ; the chest is filled with mucus.” After 5th dose “cough and sweat at night.”—E. H. Van Deusen (H. M. March, 1903) records this case : A child, 2, had recovered from a laryngotracheitis. There remained a cough, convulsive, hoarse and gagging occurring at 1 a. m., and lasting one or two hours in frequently repeated paroxysms. Several remedies were given fruitlessly. Then *Op.* 6 two drops on sugar gave a quiet night. Then the cough returned 11 p. m., and lasted till 1 a. m. Ag. n. 3x gr. ii in 2 ounces of water : 2 drams at 6 p. m. and 8 p. m. with entire relief from the first dose. In the chronic

laryngitis of professional singers *Ag. n.* is in the first rank.—Among the peculiar *symptoms and sensations of Ag. n.* are headache with chilliness. Mental exertion = pain in the head. A cool wind, passes from right frontal eminence to right eye. Aching in the head with sneezing. Burning pains. Digging pains. Pressing pains. All-day headache. Headache < by strong and agreeable odours. Confusion in head > by eating. Pains fly about : right forehead, bone of left forehead, right wrist ; occiput and frontal protuberance. As if a board before left ear. Tickling as from a feather in the throat. Sensation as if a stick in the throat. Nausea resembling hunger ( hunger-pain ). Wakes with sensation of heavy lump in region of stomach. Gnawing in stomach. Stinging in liver. Sensation of a ball ascending from abdomen to throat. Sensation in urethra as if a fluid running from behind forward. As if a splinter had been pushed in urethra. Attacks of suffocation on waking as if a cord or iron band were around chest. As if period were coming on. As if bones were loose in sacro-iliac synchondroses. As if a spider's web were on left forehead and cheek. Pains which increase and decrease slowly. The sacral and pelvic bones are the seat of many pains.—The debility of *Ag. n.* is profound and is mental as well as bodily ; the least mental effort = headache.—*Ag. n.* has many dreams and Boniface Schmitz (*Jour. Belge d'H.* 1876, v. iii., p. 99) gives this case : A girl became insane after witnessing the sudden death of her sister at a ball. Among her symptoms

were "visions of serpents," and this led to *Ag. n. 3* being given with complete success. Kraft mentions dreams of the dead ; that he is carrying them up and down stairs ; and he mentions one case in which the patient had this dream for three weeks.—Some leading conditions are : < when angry : "when he becomes angry he becomes vehement, and pain in the head comes on ; cough, pain in the chest and weakness follow this anger. The anxiety that he has from these circumstances will bring on complaints" ( Kent ). Thinking intently or mental exertion = headache and makes vision <. Intolerance of tobacco-smoke. "< *After lunch*" led me to the cure of a case of vertigo with this modality. The repertory gives it vertigo < after dinner. *Ag. n.* has many symptoms > by eating, especially nausea ; and confusion in the head. Coffee < confusion in the head. Strong and agreeable odours < headache. Headache is < in open air ; < on waking ; < in afternoon ; < by least motion ; in warmth. Infra-orbital neuralgia < in winter ; eye-symptoms are < in warm room ; < near a fire ; > in open air ; < by straining eyes. The sore throat is < by drinking cold water and by empty swallowing. Diarrhoea is < by drinking—"drinks" run through him." There is a cough which is < in the daytime. The pains in the back are < at night < when sitting. > when stretching the spine. The back pains give a very good picture of many cases of lumbago. *Ag. n.* is suited to women at the climacteric ; to young widows suddenly bereft.—A writer in *Medical Century* ( Nov., 1913 )

calls attention to a point in the dosage of Ag. n. He had been unsuccessful in some gastric cases in which Ag. n. was apparently indicated when giving it in either potencies or 3x tablets. He then prepared a 1 per cent, aqueous solution and gave three to five drops of this in a little water every two or three hours, with speedy relief to indigestion symptoms. It will be necessary to use distilled water for these solutions.—Dr. Collard ( *Le Prof. de l. 'II.* Jan., 1914 ) relates the case of a woman who had long been treated for attacks of hepatic colic frequently recurring. She vomited everything she took. Every time she swallowed any food it seemed to *fall into the stomach on an ulcerated surface*. She had the skewer-like pain ( *la douleur en broche* ), pain provoked by pressing at the level of the epigastrium and radiating into the back. *The headache was > by pressure, or by tying a bandage tightly across the forehead.* Bis. 6, Carbonate of Bismuth, crude, Phos, 6—all failed to help. Ag. n. 30 cured rapidly. The vomiting ceased, never to return.

RELATIONS—An occasional dose of Pul. favours the action of Ag. n. in ophthalmia. *Compare* : Effects of shock or grief, Aco., Ign., Opium. Cough from anger. Ant. t. Effects of apprehension, Ana., Gel. Craving for cheese, Lyc. ( but with Lyc. gratification = sickness ). Liquids run through him Fer. (but with Ag. n. the stools are apt to be green). < From ice-cream, Ars. Ringing in ears and deafness. Na. sa. Brain feels full, Scu. < afternoon, Lyc. < waking, Na. m. Pressure deep in brain, Bac. ("deep in" headache)

Pains increase and decrease slowly, Stn. Gnawing at stomach, Act. r. (gnawing as from rats). Sliver sensations, Nt. x. Locomotor ataxia, Alm., Almm., Oxt.

CAUSATION.—Anger, Grief, Shocks.

—*The New England Medical Gazette.*

---

## PYREXIA.

### FEVER.

Heat of the body is generally known as fever. Fever often takes place from two kinds of facts, viz :—one from injury to the tissues or organs and is called secondary or symptomatic fever and another not from any injury or hurt but from causes inside the blood and is called ideopathic fever. Any poisonous or foreign substance is introduced into the circulation and produces pyrexia.

**Symptoms**—The first symptom noticed in fever is the *rise of temperature*. This is a positive symptom and is always more or less present. This heat is either subjective or objective. Thermometer is the true guide to detect fever. In the normal state the body temperature is always 98 or 98.4 F. From 99 to 100—104 and even higher is the fever heat. Sometimes it rises to 108-10 degrees.

The second symptom is *the change in the secretions or excretions* of the body. The perspiration is stopped owing to the stoppage of the skin

excretions. Constipation, coated tongue, thirst, loss of appetite ; scanty and high colored urine ; all these symptoms are produced in this way. From tissue waste urea and uric acid secretions increase, also albumen and phosphates but chlorides are either decreased or absent altogether.

The third symptom is the change in the circulation of blood. Pulse is frequent, it ranges generally from 120 to 140 per minute. One degree of the rise of temperature corresponds to eight to ten beats in the pulse. If fever continues for sometime and if it becomes serious, the pulse will in that case be weak, small, irregular, even it becomes intermittent. In that case you must conclude that heart is not all right but weak.

The fourth symptom is about *respiration*. It becomes frequent. This must be accounted for by the increase in the formation of Carbonic acid gas in the system. The nervous symptoms are prominent if the fever continue unabated for sometime. First of all chill, shivering, pains in various parts of the body, great lassitude and utter prostration, headache, restlessness, insomnia and even delirium. These nervous symptoms are followed by violent delirium, coma, extreme prostration, shaking of hands and feet, picking at bed clothes and even convulsion.

And the last symptom we find in fever cases is the *tissue destruction*. The patient becomes weak and emaciated, muscles become thin and wasting followed by great anemia or bloodlessness.

Fever abates in two ways. When the temperature suddenly falls, it is called *crisis*, but when it gradually decreases it is called *lysis*. There is also a combination of crisis and lysis.

There are various kinds of fever. When it is unabated it is called *continued fever*. The temperature gradually increases till it reaches its height ; and subsides at once. The second form is *remittent* fever. Temperature increases and decreases alternately. Fever does not leave entirely. The third form is *intermittent*. In this form the temperature goes down to normal and after sometime of rest rises again. There is also a *relapsing* form.

Then again we have (1) *simple fever*, when it is not of a serious nature. (2) *Inflammatory* fever from some local inflammatory condition of body. (3) *Hyperpyrexia*, when the temperature is very high, viz : from 106 to 108 or 10. In malaria, rheumatic fevers, sunstroke or lung inflammation this form of fever is present. (4) When the patient becomes very weak and prostrated from fever it is called low fever ; all typhoid and malignant fevers are of this kind. (5) And last of all is *hectic* fever in which pus is formed in some internal parts or organs. Here the temperature is not generally very high but the pulse is weak and frequent and tissue waste is gradual but alarming. *Prognosis* of fever cases depends upon the nature of the disease. In simple cases it is always favorable but in malignant disease the prognosis is grave.

## SIMPLE CONTINUED FEVER.

This is an ordinary simple fever, continued for a day or two with some temperature and then gone.

**Causes**—It is not caused by any poison introduced into the system. Any exposure to cold or heat, exposure to rains, heavy bodily or mental labor, greedy eating,\* and drinking etc are the causes.

**Symptoms**—Fever ushered with some chill or shivering, pain in the body, weakness, malaise, headache. Later on the skin becomes warm and dry, pulse full and frequent, headache increased, red face, restlessness and nightly delirium; thirst, tongue furred and coated, loss of appetite, constipation and red urine.

Temperature rises to 101 or 102 F. It remains in this state for a few hours and then subsides. It remains for a day or two and sometimes even for a week. Restlessness, thirst and bone pain.

**Treatment**—Treatment is easy and successful.

*Aconite*—In the beginning. Pulse full, bounding and quick. Restlessness, thirst and bone-pain.

*Camphor*—It is very efficacious if it is caused by cold exposure. After a few doses fever is gone with copious perspiration.

*Gelsemium*—Nervous restlessness, drowsiness. and pulse frequent but small.

*Veratrum viridi*—Irritable and sanguine temperament and intense headache, nausea, pulse frequent and full.

*Bryonia*—From indiscretion in food or from cold,



pains in limbs, constipation, tongue coated. Head heavy and painful.

*Arsenic*—It is often of great service. Restlessness, thirst and burning body.

*Belladonna*—may be useful after aconite. Headache flushed face and delirious talks.

*Diet*—Simple and light. Generally barley or sago water, either sweetened or salted with lemon juice.

### TYPHOID FEVER.

It is also called enteric fever because in this fever the intestinal canals become out of order. Old authors named it Abdominal Typhus.

*Causes*—Some poisonous substance enters into the body and causes typhoid fever. It is now known to be typhoid caused by the *Bacillus of Eberth*. It is believed that this germ is always introduced into the body by way of the digestive tract. Generally by means of water or adulterated milk it is introduced. Milk or water may be infected by excreta from a typhoid patient. It is a contagious disease ; when it prevails in one place many persons are attacked with it at the same time. So it is an epidemic disease. This disease appears in all ages, but youngmen and women are more affected than the old and the infant. Many assert that it is a disease of poor people but this is not tenable by facts. Many years ago our late Queen Victoria's husband was attacked with this disease and died of it. Again her son our late King Edward had a severe attack but he was saved.

**Symptoms**—Invasion of this disease is gradual. First of all you cannot know that this fever will turn into a typhoid fever. Onset is sudden. Chill ; headache ; buzzing in ears ; pain over the whole body ; malaise ; sleeplessness ; anorexia ;\* and diarrhœa or vomiting.

Dr. Murchison says that in the first week the fever continually rises in the afternoon.

Pulse small and frequent, weak and soft ; nearly from 100 to 120 per minute. Tongue is at first moist and becomes dry afterwards. Tip of the tongue is red, other parts white. No appetite, nausea and vomiting.

First of all constipation, but diarrhœa comes on later. Pain in abdomen which is painful on pressure. Abdomen distended and on pressure on the right iliac fossa gurgling sound is obtained ; stools thin and watery, yellow or peasoup color, very offensive.

On the second week disease is aggravated. The temperature rises up to 105 or 106 F, sometimes it is more than that.

Skin hot and dry. Face red and brain symptoms develop. Patient is sleepy and delirium increases. If asked, how is he, he answers all right. Tongue on protruding is shaky. White sordes on the tongue and teeth.

Diarrhœa is increased and assumes the character of "pea-soup". In many patients peculiar eruptions appear over the body ; first they appear on the abdomen and back ; later on hands and feet. They are

called "typhoid rash". In appearance they seem to be red points like pin's head ; they are distinct and on pressure they disappear and on withdrawing the pressure they appear again. They are very marked on Europeans and fair persons. This is a very critical period, most of the patients die within 15 to 21 days.

In the third week the patient gradually becomes better. Morning remission and evening exacerbation is noticed, Other symptoms are almost the same. The patient becomes very weak and exhausted, sleepiness is marked or increased. Pulse very weak. Tongue dry and yellow. Many bad symptoms appear.

In the fourth week the patient is getting better.

**Treatment.**—Typhoid fever attacks the blood so when a person is under this fever, it is not easy to cut short the disease. It is a general belief. But under homeopathic treatment we can cut short the disease or expedite the cure in a short time. Many physicians, even among the homeopaths, have doubts about it.

Years ago there was a discussion in the London Homeopathic Society whether it was possible to cut short typhoid and consensus of opinion was on the possibility of such a happy issue.

*Baptisia* :—among the remedies in typhoid fever, this medicine has an unique action. When applied in the first stage it cures the disease in a short time. Dr. Hughes says it has a marvellous effect in typhoid fever. Nervous symptoms predominat , tongue coated ; yellowish, watery offensive stools ;

gurgling sound on pressing upon the abdomen ; pulse frequent small and compressible, beginning of delirium, despair of recovery, picking at the clothes. Patient thinks that his limbs and parts of the body are separated and tries to gather them together ; bad smell in urine and sweat, extreme prostration.

*Bryonia*.—In this fever Hahnemann lays much stress upon Bryonia. He recommends its use in conjunction with Rhustox. Cough and bronchial disease ; intense headache ; constipation, pain in abdomen ; delirium of business, tries to get up in bed and wants to go home ; tongue coated and dry ; much thirst ; drowsiness and chilly feeling.

*Belladonna*.—In delirious stage Bell is one of our best remedies. Face flushed ; throbbing of carotids, intense headache ; red eyes, pupils dilated ; tongue red and cracked ; pulse small and frequent. Belladonna is one of our shut anchor when delirium is violent and deep.

*Rhustox*. In severe cases, especially when abdominal symptoms are pressinent. Profuse and foul smelling stools, tongue furred, red at the tip and dry, triangular tip of tongue, extreme prostration but patient is restless. Pain in various parts of body ; cough and bloody expectoration.

*Arsenicm*, is very analogous to Rhus t. If Rhustox is tried and no benefit is derived, we can give Arsenic. Great restlessness ; thirst, drinking often but small quantities at a time. Sinking of the vital force ; profound delirium, loss of consciousness ; besoted

expression, tongue red and dry ; foul smelling stool and urine ; cough, difficulty in breathing,

*Phosphoric acid*, is another remedy for weakness and prostration. In mild delirium it is of great use. Patients half drowsy and apathetic. Abdomen affected from the beginning, bad smelling yellow or white stool ; does not like to talk ; nose bleeds. Borborygmus. Copious and cold perspiration. Pulse weak and small.

*Muriatic acid* is useful in the later stage of the disease. Great drowsiness, delirious talks, sliding down in bed, loss of consciousness, stertorous breathing and cough involuntary stools of watery and bloody nature.

*Phosphorus* is applicable when lung is invaded. Difficulty in breathing, cough dry or moist, sputa tinged with blood, extreme weakness, pulse almost imperceptible. Diarrhœa involuntary, hands and feet cold, small eruptions.

*Opium* is our help in cases of drowsiness which amounts to comatose condition. Fever not very high ; talks and falls into deep sleep the next moment. Half closed or upturned eyes. Copious perspiration.

In this stage *Nux moschata* is of great assistance to us, especially when *Opium* fails. Extreme prostration ; tympanitic abdomen ; watery, yellow and fetid stools.

*Terrebinthina* helps us in tympanitic abdomen, bloody stools and great weakness.

*Carbo veg.* in extreme cases of prostration. Copious sweats, skin cold and tympanitic abdomen.

*Lachesis* is one of our best remedies in cases of

typhoid fever. In this country our Kavirajes use serpent poison, especially that of naja or cobra as a good remedy for *Bikar* typhoid states. Great prostration, drowsiness, delirium, patient thinks that he is dead ; tongue red, furred ; fetid stools ; defficult breathing. Lachesis is a very good remedy for hemorrhage. We have cured very desperate cases of intestinal hemorrhage with this medicine.

The patient should be kept in a well ventilated and well lighted room. Many furniture should not be kept in the sick room.

He should not be allowed to leave his bed, even for passing urine and stools ; bed pans and similar things are to be arranged for those purposes.

Patient's rooms should not be overcrowded, and much talking and noise should be stopped. Diet should be regulated with utmost care. My plan is not to give any food when the bowels are in a bad condition. In hemorrhage and tympanitis and frequent purging no food should be given. Barley water or sago is the only food in the bad state. No stimulant or stimulating food should be given. Plenty of fresh water is allowed. Milk and meat are bad. Dr. H. C. Allen used to say "pure water *at libitum* is all that I give."

---

### Notes.

Homeopathic Hospital reports have been sent to us. It is encouraging to see that much progress has been made in the arrangement and proper treatment of the

patients. The health officers of our city has remarked that it is properly kept clean and in order, though he frankly says that he cannot express any opinion about the therapeutics of this system of medicine. We shall make detailed review of its works in a future issue.

The Medical Standard of Chicago says about how is measles transmitted. "It has been long the professional as well as the popular opinion that measles is transmitted by the scales from the desquamating epithelia, and the patient has consequently been quarantined till the scaling process has entirely ceased. This view has been disturbed by investigations recently made by Anderson and Goldburger, of the United States Hygienic laboratory, who has reached the conclusion that the real source of infection is the secretion from the nose and mouth. The disease is most contagious, therefore, during the pre-eruptive stage, when the catarrhal symptoms are most in evidence. In absence of catarrhal symptoms the disease ceases to be contagious. Anything which may be foiled with the buccal and nasal secretions during the active stage of the inflammatory symptoms at this site may serve as a carrier, for instance, handkerchiefs, bed clothing, wearing apparel, and the like. If these investigations are substantiated by the experience of others, the problem of prophylaxis, as well as the difficulties of quarantine, will be easier to solve."

The rains are difficient in various parts of Bengal

this year ; so there is little likelihood of a severe outbreak of malarious fevers. In Eastern Bengal there is inundation from the the big rivers ; so all bad materials of villages are washed off and that also tends to lessen the chance of a severe outbreak. God alone knows.

Dizziness in Diabetes Mellitus is a common symptom in many patients. It is mostly due to weakness caused by excessive flow of urine and may be easily controlled by indicated homeopathic medicines.

Death Rates. The Iowa Homeopathic Journal points an abstract of the reports of the allopathic and of the homeopathic hospitals connected with the State University. The allopaths treated 1905 cases with 61 deaths and the homeopaths treated 580 cases with 7 deaths. The allopathic death rate was 302, while homeopathic death rate was 1. 2.—Homeopathic Recorder.

---

## Obituary.

DR. BENOARI LAL MUKERJI

We regret very much to record the untimely death of Dr. Benoari Lal Mukerji of Berhampur, which melancholy event took place at Benares on Saturday the 29th May, 1915.

He was graduated from the Campbell Medical School, Calcutta, in the year 1882. He was born in the village of Kolara in the District of Hughly in 1264 B. S.

When he was practising at Berhampur his relative late Babu Sat Couri Mukerji told him to study homeopathy. The doctor then was



an allopathic physician of some repute. He commenced to study homeopathy and gradually became a reputed homeopathic physician of that city. Late Rajah Ashutosh Nath Roy of Kasimbazar, attracted by the skill and reputation of Benoari Babu, employed him as his family physician in which capacity he worked with zeal and attention. After the death of the Rajah, he was offered the family physicianship of Maharajah Kshounish Chandra Roy of Krishnagore, Nadia. Here he also worked with credit. A few months before his death he retired from Maharajah's service and went to our holy city of Benares to pass the remainder of his days. But he was not destined to enjoy this blessing long. After a stay there for a few months, he expired.

Dr. Mukerji was known to our renowned Dr. Behari Lal Bhaduri from whom he learned good deal about homeopathy. Dr. Protap Chandra Majumdar also took him to his confidence and helped him in cases of difficulty. Dr. Majumdar uses to say that Dr. Mukerji is a true type of Hahnemannian homeopath and practised it in consistence with the teachings of the Organon. He practised sometimes in the city of Monghyr where he also got good reputation. It is a sad loss to homeopathic profession in India by the untimely death of Dr. Benoari Lal Mukerji. He left a son and a widow and a large circle of friends and patients to mourn his untimely death. He was only 58 years when he died.

Bonoari Babu had a very good moral character. He was a Hindu of firm belief and was always kind to his poor patients.

MOHENDRA NATH BHATTACHARYA,  
Homeopath of Boinchi.

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV. ]      SEPTEMBER, 1915.      [ NO. 9.

---

## TYPHUS FEVER.

It is also called Cerebral Typhus because the brain is primarily involved in this disease.

It is a specific contagious disease. Its duration is long and there is found a sort of eruptions in the body.

**Etiology.** \*It takes its origin from a poison introduced into the system. It emanates from the skin and chest and inhaled by the nurse and other people who come in contact with the patient.

In hospitals and dwellings where large number of persons congregated this poison is generated. It also originates from clothes, \*beddings and other belongings of the patients. England, Scotland and other cold countries are principally the seat of this disease. It is much rare in warm climates.

**Symptoms :** Its invasion is sudden. Sometimes there is weakness, malaise, pain in the body, backache

sleep and restlessness. The very first fever is very high, temperature rises up to 105 or 106 degrees. Red face, puffed eyelids, sometimes cough and pain in the throat. Tongue coated and there is constipation, very rarely diarrhœa. In the first week typhus rash appears. First it appears on sides, chest and abdomen and then spreads over the whole body. It is not in the face and neck.

At the end of first week, patients have muttering delirium ; sometimes they try to get up in bed with force. At the end of second week, the condition becomes serious. The patient becomes comatosed and sees visions. His eyes are open but there is no consciousness. Shaking of hands and feet and picking at the bed clothes. Difficulty in breathing, and cough soon overtakes him. Pulse frequent, irregular and intermittent, about 150 times in a minute. There is a bad smell issuing from body and breath. If the disease increases after these, death is sure. Death generally takes place between 12th and 18th day, from coma, difficulty in breathing or failure of heart action. If the patient recovers, copious perspiration or purging and urination takes place. This happy issue comes from the 14th day generally ; sometimes it comes before that date. Complications are not rare in this disease. Mostly chest affections such as pneumonia, bronchitis, pleurisy &c are present. Sometimes mental states are deranged as for instance meningitis, insanity or want of mental vigor. Paralysis, nephritis, glandular swelling are not rare.

**Prognosis.** This a very serious disease ; so the

prognosis must always be guarded. In weak persons and infants it is very dangerous.

**Treatment.** *Aconite* is useful in the beginning. Fear of death, restlessness, very great headache and pain in the body.

*Agaricus.* Disinclined to talk, delirious talks, tries to get out of bed, pupils contracted, tossing about like a drunken man. In the low state of delirium when the pulse is thready, almost imperceptible and coldness supervened we get much benefit from it.

*Apis.*—Drowsiness, delirium, piercing cry which we call brain-cry, tongue dry, abdomen distended and painful, suppression or retention of urine, involuntary stools, dry cough. Hering praises *Apis* in this disease and we often get great benefit from it when indicated.

*Arsenic.*—Anxiety and restlessness, hand and extremities are moving about, face like a dead man, tongue coated, involuntary urine. In cases of extreme weakness when pulse becomes almost imperceptible, *Arsenic* is one of our great helps. Several potencies have been used with success, from the 1st to the c. m. potencies we have used.

*Belladonna* is one of the best remedies in typhus fever. Sudden starting, violent delirium, attempt to get out of bed, intense headache, photophobia, pupils dilated, face red, involuntary urine and defecation, dry cough aggravated at night.

With the help of *Belladonna*, *Hyoscyamus* and *Stramonium* form a trio, we have been able to effect marvellous cures in desperate cases.

The difference between these three are very marked.

*Belladonna* has congestion and inflammatory stage. From these brain is affected with delirium. *Hyoscyamus* is quite different. In this the brain is primarily irritated and subsequent symptoms are the outcome of such irritation of the brain substance. Violent delirium comes from *Stramonium*. Whatever we have said above are known by the difference in the symptomatic indications of these remedies.

*Bryonia* is another very important medicine in typhus fever. Nightly delirium, business talks, intense thirst, pain in body, tongue deeply coated, constipation, cough, pain in chest and extreme weakness are its symptoms.

*Hyoscyamus*—complete unconsciousness, muttering delirium, tries to uncover himself; laughing hiccup, hands and feet tremble and sleeplessness.

*Lachesis*.—Extreme physical and mental debility, symptoms are aggravated after sleep, headache, dry and teasing cough, difficult breathing, pain in the throat, heart's action irregular, muttering delirium all the time.

*Opium* is an important remedy especially in soporous stage. Sleepiness and complete coma, snoring breathing, delirium, half closed eyes, face red and puffed, suppression of urine and feces, picking at the bed clothes and depression of lower jaws.

*Phosphorus*.—Slight delirium, eyes half closed or

coma vigil, picking in air, cough with wheezing, difficulty in breathing and extreme prostration.

*Phosphoric acid*.—Perfect apathy, does not want to talk or answer questions, drowsiness with slight delirium, headache, deafness, pain in region of liver, involuntary stools, profuse urination, Pulse quick and small, cough with putrid sputa, profuse sweat at night and morning. For mild delirium phosphoric acid is one of the best remedies.

*Rhus tox*.—Great restlessness and incoherent talks, extreme weakness, terrible dreams, headache, tongue red and dry like a piece of raw leather, parotitis, bad smell in breath, intense thirst, dry cough, glandular swellings. At the later stage of the disease profound sleep or coma supervenes. Hahnemann cured most of his cases of typhoid fever with *Rhus tox*. Both higher and lower potencies are efficacious.

*Stramonium*.—It is a good remedy for violent delirium, the patient gets up with force, fixed vision, tries to bite, black and fetid stools, suppression of urine, tossing about and starting of hands and feet, trembling of hands, picking at bed clothes.

*Veratrum viride*.—Restless sleep and dreams, intense headache, staring eyes and dilated pupils, face and eyes red, hard breathing, hiccup, heart's action weak, trembling of hands and feet. We use it when *Belladonna* fails.

The patient's room should be well ventilated, and many people should not be allowed to crowd in the patient's apartment.

In the first stage of the disease, nothing but only barley and sago water should be given. In the later stage when the patient becomes weak, a little milk may be added. Plenty of water should be given when thirst is prominent. People in this country are cruel in withholding water in thirst. It is bad.

Brandy and stimulants are always injurious in cases of this kind.

---

### MEASLES.

It is also called rubeolæ or morbilli. In this country, at the advent of summer, measles cases are numerous ; and then the disease appears in an epidemic form.

Measles is an eruptive fever and very contagious.

**Causes.**—Inhaled air or touch of the patient is the cause of measles, Infants and young children are subject to measles. Many authors say that measles takes place once, no more attacks are seen ; but this is erroneous.

**Symptoms.** The disease takes place about eight days after the introduction of the poison into the system ; sometimes this period is prolonged.

In the preliminary stage slight chill, pain in body and fever. Children cry and become restless and irritable. Cold or catarrh is a sure sign of this disease. Eyes red and watery, photophobia, warm water running out of nose, constant sneezing and even blood is oozing out of nostrils. Heaviness in frontal region, throat is red and painful and heavy speech. Bronchi and

trachea are catarrhal. Pain and heaviness in chest, constant cough, difficult breathing. Vomiting may be present. Generally constipation at the beginning, very seldom diarrhœa.

Eruptions appear at last. In four or five days eruptions are visible, occasionally later. They appear first in the head and face, especially forehead and spread over the whole body. First they look like spots of mosquito bites and become larger later on. Generally within 12 to 24 hours, they attain their highest and then begin to subside and desquamation take place. Occasionally eruptions get suppressed and difficulty arises.

The sequelæ or after effects of measles are troublesome and dangerous. They are various. Ophthalmia, bronchitis, pneumonia and other chest affections, diarrhœa or dysentery. After the appearance of the eruptions fever generally subsides but often we do not find such favorable signs. Fever persists and sometimes very high.

There are two kinds of measles seen. first, simple form. The second is a grave form of the disease and is called *Moribili gravis*. It is also called malignant measles. This is a bad kind of disease.

**Treatment.** Many authors say measles requires no treatment ; it is especially true in allopathic treatment, because in this complications may arise from medicinal effect. But in homeopathy it is not so. We can cure cases in a short time and with a simple administration.



In the invasion stage either Aconite or Belladonna will give prompt relief. In fact the disease is cut short and complications aborted.

Many physicians advice Pulsatilla in all stages of the disease but it is not true. Pulsat is useful in catarrhal stage of the disease when nasal discharge is thick and bland and cough present.

When the cough is dry and teasing and aggravated at night, Belladonna is very useful. We generally give the lower potencies but 200th or higher we use with greater success.

In the first stage of the catarrh we derive much benefit from Euphrasia, especially when the eyes are affected.

In malignant measles Arsenic is very important. Antim Tart, Mercurius and Hepar sulph are necessary in bronchitis.

Diet should be simple. Protection from cold is absolutely necessary.

---

## PROVING OF ROHITAKA.

(TECOMA ANDUBTA).

*(Continued from page 281 Vol. XXIV.)*

21st January 12.

After getting up from bed in the morning. taste bad and bitter as if rotten (putrid) Great languor even after awaking from sleep. After several efforts to rise, again sank down into bed.

A sense of being knocked up as if after riding along distance on horseback or severe physical exertion.

In the early part of night no sound sleep. Sleep full of dreams mostly about moving in various places and seeing previously acquainted persons. Sensation of internal heat with relief on being uncovered.

Pricking all over the body with internal heat. Heat in head specially in vertex. Head-ache in front and temples.

Nausea and waterbrash. Rawness in throat as on previous days.

Vexation and loss of temper on slight provocation.

9 A. M.

Burning in stomach with nausea. Staggering gait when walking in the Street.

9. 30. A. M.

Burning in stomach as from excessive hunger with nausea, vertigo and staggering when walking.

Palms of hands hot and burning.

Body hot ; cannot bear the sun at all.

Pain in the left side of neck.

Misspelled in writing.

Yawning at times.

Sense of heat all over body. Eructations.

Head and body hot, desire to bathe.

10-45. A. M.

Acid eructations with burning in throat.

11 A. M. to 11. 15 A. M.

Rumbling in abdomen. Eructations.

In effectual urging to stool. Sick feeling in stomach. Nausea. Water brash. Heat in top of head. Headache in front.

3-30 P. M.

Heat in top of head. Sensation in temples like headache.

Burning in pit of stomach and splenic region. Sensation of radiation of heat from those regions.

4 P. M.

Heat in head. Heat and tensive pain in forehead. Whole body hot and burning with desire to uncover. A sort of distressing sensation inside the forehead. In directing the eyes towards any object, it seems to move round.

4-45 P. M.

Feverish-Frontal headache. Flushes of heat in face and eyes. Head hot, palms and soles very hot. Burning all over the body. Head hot with a sense of emptiness.

Makes mistakes in writing. Cannot collect thoughts.

Pulse full, round and rather quick. Mouth and inside of throat at times dry, at other times viscid.

Pain in hepatic region both in front and back. Sweat in axillæ and bends of knees.

The usual stool after mid-day meal is wanting to-day. Flatus only passing at the effort, There was scanty stool in the afternoon.

In the evening head and forehead hot. Sense of emptiness in head. Cannot recollect anything.

22. 1. 12.

Lassitude in getting up from bed in the morning. In the previous night, disturbed sleep. Sensation of

heat, was obliged to uncover from time to time. Relief in keeping the hands and feet outside the bed cover.

In the morning burning in stomach, hunger, nausea, bitter taste in mouth and throat.

9 to 9-30 A. M.

Heat in the top of the head. Cannot bear covering on head. Burning in stomach with nausea, feeling as if hungry. Water brash more profuse than on previous days.

3-30 P. M.

In writing drops letters and words. Head hot, flushes of heat in eyes and face. Pain in hepatic region.

8-30 to 9 P. M.

While listening to a musical performance in a public place, pain in the region of the gall bladder continuing for a long time.

Memory disordered. Cannot think over a subject with steady attention. Cannot concentrate thoughts on a subject.

Vision disturbed, objects appear blurred on being looked at :—as if in a haze ; cannot recognise a well-known person even at a short distance.

In bed at night sense of internal and external heat.

23. I. 12

In morning on awaking from sleep, skin and head perceptibly hot. Open air and coolness, feel very pleasant. Taste bitter and insipid. Dryness in throat and sense of rawness in empty swallowing. Pain in

the hepatic region when yawning after awaking from sleep. Face and hands now feel hot. Lassitude. Desire to remain in bed even after awaking from sleep, contrary to previous habit.

Passing flatus on awaking from sleep, but no urging to stool until sometime after passing urine and lying in bed when the evacuation was satisfactory.

It appears there was a slight attack of fever at night during sleep.

Yawning at intervals. Sour eructations, cannot bear stockings on, wants to keep feet and legs bare. Palms hot and burning.

Cannot bear the sun, it is distressing, causing a sense of burning and pricking.

Cool air coming in contact with head and skin while walking outside in the morning highly delightful.

Though felt hungry could not eat enough at the midday meal. Before meal sense of heat and burning in stomach. Wind accumulated in the intestines. Sensation as of a call to stool. Sense of hunger at other than meal times ( burning in stomach ).

8 to 9 P. M.

As on previous day pain in hepatic region while listening to a musical performance at a public place.

24. 1. 12. 4 to 5 A. M.

Cannot collect thoughts so as to be able to think out a subject and put it methodically in writing.

Slept better than during the last few nights, cold was not felt as could be expected from the state of the atmosphere.

Had a stool at 4 a. m., then went to bed again but no sleep, langnor in the morning less than previous days. Taste bitter and putrescent till midday meal was taken.

Wind in the bowels more in the lower abdomen. Slight rumbling with desire to go to stool. Flatus escaped at intervals sometimes with effort. Palms and soles hot and burning with relief from contact with cold.

Hot flushes in crown of head relieved by cold water or air.

Throat dry with a sense of rawness. Sense of heaviness and heat in the stomach. Eructations at times as after a heavy undigested meal. Buttoning the coat over the abdomen even a long time after meal causes distress.

4. P. M.

Forgetfulness for some days past. Makes palpable mistakes in his accustomed daily work.

Trembling of hands is being slightly felt. Bowels rather constipated for some days past.

9-30 P. M.

Great urging to stool after night meal. Evacuation easy thorough and gave satisfactions ( This might in part be the result of a change in the midday meal which consisted of *ghol* and *chura* ( ঝোল ও চিড়া ) besides the usual staple, viz. rice ).

Forgetfulness very pronounced.

25. 1. 12. 5-30 A. M.

Awoke a little before 4 a. m. passed urine and

again went to bed. A little while after was called to stools. Evacuation thorough and satisfactory but had to sit at stool for sometime.

No change in taste which is bitter, there is also the same dryness and rawness in the throat.

4 P. M.

Passed stool which was flat and in round roller form. Deficiency of bile in stools. Smarting in anus after stool. Stomach full and heavy even after a moderate meal. Buttoning the coat even two or three hours after meal causes distress.

26. 1. 12. 8-30 A. M. •

In the morning taste bitter and insipid. Languor in getting up from bed. Pain and bruised feeling as after a paroxysm of fever. Tongue coated more at the back. Bowels moved at 4 a. m. The accustomed motion of the bowels in the after-noon is wanting.

The symptoms such as heat and burning in head, palms and soles are less pronounced than on previous days.

27. 1. 12. 3 A. M.

Awoke before 2 a. m. various thoughts and fancies arose in the mind, while lying with eyes closed.

Taste bitter and putrescent, dryness in throat. Had to hurry to the closet on account of urging evacuation. Not thorough, scanty partly hard and partly soft. After a part of the stool was expelled, noise inside the loins as of wind cracking. Had to sit at stool for some time from a sensation as of something

remaining behind although there was no urging for stool.

During day and night slight pain was felt at intervals in the region of the liver and spleen.

Skin hot, felt feverish—Palms and soles hot from afternoon of the previous day. Forgetfulness persisted but less than on previous days.

Stretching limbs, while lying awake in bed.

Slight fever sometimes after midday meal. Lassitude and a sense of weariness, thirst with dryness of mouth. After 3 p. m. passed scanty stool. Then dryness of throat and mouth. Could not help drinking some water.

Heat in head and palms and soles much less but a sensation of coldness was felt and stockings were better tolerated than on previous days. Forgetfulness also was less marked.

In the evening stockings were better tolerated than on previous days.

The sense of repletion which was experienced on previous days even after eating so little is felt much less to-day. No eructations or distress from acidity of stomach.

28. 1. 12. 3-20 A. M.

After awaking from sleep unwillingness to leave bed although there was urging to pass urine, was obliged to get up. Being urged to stool.

On rising a sense of languor and pain all over body as on previous days. Stools rather loose and



larger in quantity than on the preceding day, but not to satisfaction.

Taste bitter and insipid but less than on previous day. During and after stool a feeling of dryness of mouth and throat.

Another stool in the morning smaller in quantity than the one at 3 a. m. Escape of flatus with noise at intervals.

In the after-noon another stool but scanty.

Excepting scantiness of stool and bitter and insipid taste and heat and burning in palms and soles the other symptoms of the drug are not pronounced.

29. 1. 12. 5 a. m.

A stool a few minutes before. Small in quantity. Bitterness of taste was pronounced just after awaking from sleep but now (5 a. m.) not so. These symptoms not so persistent now as before.

Forgetfulness has also abated.

6-30 A. M.

Great languor and unwillingness to leave bed. After 3 or 4 vain efforts to rise. Sunk down in bed again. After rising great languor and sense of pain all over body.

Easily excited to anger and led to give effect to such anger.

There has been a bilious stool after the mid-day meal. After an interval of several days.

Escape of semen when passing urine with stool and also at other times.

30. I. 12.

Sense of languor on rising in the morning less than on previous days. Constipation also is gradually decreasing. In the preceding day there were 3 or 4 small stools. This morning also there have been 2 or 3 such stools. Stools are gradually becoming looser.

There was something like indigestion in the previous night.

In the morning the bitter and insipid taste which has been presented all along is not now so markedly felt. There has been decrease of the forgetfulness and of heat and burning in palms and soles.

31. I. 12.

Feeling as if piles would breakout. Slight protuberances being felt in the margins of the anus when touched.

During first part of February—1912.

The chief complaints were indigestion, acidity, and feverishness in afternoon with bad taste in mouth and languor.

Every night heaviness, heat and fermentation in stomach with eructations was called to stool after midnight. The disorder of the bowels continued till morning with a never-get-done feeling when one or two loose stools were passed.

Sense of languor after midday nap and a feeling as if the body was bruised when getting up. In the afternoon acid eructation, heat and burning in palms and soles, face and eyes. One of these days pain

and sticking were felt in chest owing to acidity till relieved by the night meal.

In the morning after awaking deep sense of languor and inclination to remain in bed with eyes closed and when getting up a feeling as if the whole body was heavily bruished. This bruished feeling was also experienced if sleep broke off during the night.

The taste was always very bad as if putrid and insipid. Slightly feverish in the afternoon with great languor disinclination to work, want of energy, desire to sit or lie down and heat in eyes, face, palms and soles.

Flatus passed with noise during night and morning.

Pulsatilla was taken for the fever which brought down the fever but the bad state and malaise remained as before. Bryonia was taken one day for the pain on moving and the bitter taste without complete relief.

Having in view the bitter taste, bruished feeling, heat in palms and soles in afternoon.

Tacoma 6c (the drug under proving) was taken. 2 drops for a dose.

In the afternoon of that day, the acidity fever, languor and the bad taste were all gone. Energy for work, desire to walk and to talk on various subjects returned.

In the following morning, Tacoma 6 was again taken and there was further improvement than on the preceding day.

Since the day that Tacoma was taken as a remedy, there was a marked change for the better in the character of the stools. In the afternoon of that day well digested and formed stools were passed. During the night there was no heat in the stomach, no fermentation in the bowels, no indigestion or acid eructation.

This improvement continued for some days.

The morbid changes that were brought about during the proving chiefly as regards the intestinal tract were speedily removed by the drug itself in potentized form. This is a point which calls for investigation in the hands of competent experts as also the affinity of the drugs to the several organs and tissues of the body.

---

## ANCIENT HISTORY OF THE LAW OF SIMILARS.

By J. N. Majumdar, M. D., Calcutta, India.

Although the history of homeopathy is of comparatively recent origin in India, the homeopathic system of treatment, or rather the law of similars, was not unknown to the ancient sages of India. Hahnemann gave credit to Hippocrates for the early mention of the law of similars, which is found in Littré's translation of his works. "Disease is produced by similars. And by similars, which the patient is made to take, he is restored from disease to health." But we find that the law—*similia similibus curentur*—

Bishashya Bishamoushadham was known to the ancients in India.

In 1893, in Chicago, Dr. P. C. Majumdar, in an address before the World's Congress of Homœopathic Physicians, said :

There is a story in our books that on one occasion all the minor gods and goddesses were eager to become immortal, and for this purpose they were agitating the ocean to get Amrita, the principle of immortality. But instead of getting that, they procured Garal, the deadliest of poisons. Nobody ventured to accept it ; Mohadeva came to their help ; he turned that substance into Amrita by swallowing the poison, and became immortal. We homeopaths can find out a great deal of truth in it. Mohadeva took the poison into his healthy body—"proved" it, as we say—and reduced it into the life-giving principle of medicine. We presume, however crude and unreliable this story may be, that the law of homeopathy which the immortal Hahnemann set forth so recently was known to our ancient sages in India. This very principle of *similia similibus* was also embodied in one of our ancient medical works in the following passage, that "poison is the cure for poison."

This is not mere tradition. It was the practice of Hindu Sages. Depending upon this they used to give the cobra poison (*naja tripudians*) as a very efficient medicine for typhoid fever and other malignant disease. Purgative medicines were often given for diarrhœa and like troubles.

Not only did they give medicines according to the law of similars, but they also employed medicines in very minute doses. They used to triturate these substances and give them in a dose so small that it could be covered by the head of a pin. They believed that by trituration the medicinal power of a drug was developed. So not only was the law of similars known to the ancient Hindu physicians, but it was actually practiced almost in the same way as we homeopaths do at the present time.

---

## FOOD AS A CAUSE OF DISEASE\*.

By John P. Sutherland, M. D.

Dean of Boston University School of Medicine.

The question of food at the present time is to a very great extent a question of fads. This is a particularly unfortunate thing for humanity, lay and professional, and betokens a state of affairs that is lamentable. Fancies, sentiment and theories, tradition, habit and misconception are the guides whose potent and subtle influence determines, for the great majority of people, a question, the importance of which is second only to the highest moral considerations. In this field, if anywhere, there should reign an intelligence founded on an unshakable knowledge. It is easy to prove that in no field so intimately connected with the life of mankind is there such widespread divergence of opinion. It is lack of definite knowledge

---

\* National Society of Physical Therapeutics, 1915.

concerning food, and lack of knowledge only, that accounts for the presence of such contradictory views. "Acid fruits are bad for rheumatism ;" "oatmeal is too heating ;" "milk makes one constipated ;" "eggs make one bilious ;" "fruits produce pimples ;" "tomatoes cause cancer ;" are just a few quotations from everyday speech which are uttered with solemn assurance and solid conviction, but which have no demonstrable relation with actual facts. One hears of vegetarianism, of low protein diet, of uric-acid free diet, of salt free diet, of raw beef diet, of uncooked foods, of predigested foods, of pure foods, of eat-the-best-you-can-get-and-plenty-of-it-diet, and so on, advocated earnestly by professional voices, but with vague and indefinite foundation on precise knowledge.

*Contradictory views the result of ignorance.* It may be taken for granted that such wide divergence of opinion is based upon ignorance, for in the sciences, the things that are known, one does not find such contradictory views. In anatomy, histology, embryology, bacteriology, in chemistry, in physics, astronomy, geology, in short among the sciences generally there is practically unanimity of opinion that makes for certainty and progress. In physiology hosts of fundamental facts are accepted as established, but when we come to the subject of what may be called "Applied Nutrition" we find ourselves in the midst of a chaotic mass of facts and fancies, opinions and convictions. It is certainly for the medical profession to rectify this state of affairs. Physiologists and chemists

should unite their forces to illuminate with the light of knowledge the field now darkened by ignorance.

*Dietetics in medical school.* Dietetics should be made as definite and reliable as mechanics, and in all medical schools one of the strongest and most useful courses should be the one in dietetics. I wish to emphasize the difference between a class in cooking and a course in dietetics, for many teachers of cooking know nothing of dietetics, and the two things are as different as science and art. Medical schools have been far behind in the performance of their duty in not recognizing the vital importance of this subject.

In a general way it is universally acknowledged that the vitality, integrity, and health of the tissues of the body are dependent upon the blood stream which, circulating freely throughout the major and the most minute parts of the body, supplies all the parts with nutriment. It is widely acknowledged that pure blood, free from irritating and noxious wastes, and containing all the varied and necessary ingredients, is needed from which to build up healthy and strong tissues. It is neither widely nor generally recognized and certainly not practically acknowledged that blood obtains the "varied and necessary ingredients" from the substances eaten as food, and therefore that the prime value of food is to supply the blood with these "varied and necessary ingredients."

*Definition of food.* It would probably be of great service in establishing rational views on this vital topic to accept as a definition of food something like



the following :—"Food is that substance, simple or compound, which when taken into a living structure may be transformed into that structure's own protoplasm and maintain its efficiency." This idea insists upon the accepted biological view that protoplasm is the physical basis of life, and that while animal protoplasm consists chiefly of carbon, hydrogen, oxygen, and nitrogen, it also contains minute quantities of many elements not all of which presumably have yet been recognized. It is quite generally conceded that animal tissues contain carbon, oxygen, hydrogen, nitrogen, sulfur, phosphorus, chlorine, silicon, fluorine, potassium, sodium, calcium, magnesium, iron and manganese ; fifteen elements ; and traces of others have been found in the analyses of certain tissue cells. Food for human beings must consist therefore not only of carbohydrates and hydrocarbons, but of all the other ingredients of the cells of which tissues are composed. In addition to the needed elements it is also essential to keep in mind the proper *quantities* in which these elements should be supplied to the body, and in acquiring this knowledge there is much work yet to be done.

*Caloric values.* In these days we hear much about caloric values. Even the daily press, in giving instructions "How to Feed Your Family," presents long tables of caloric values of natural and artificial food stuffs. According to these instructions the only thing to reckon with in selecting a diet is the number of calories furnished by anything. The same is true

of tables presented by physiologists, dietitians, the menus at sanatoria, etc. Caloric value and efficiency seem in such estimates to bear a direct proportion, the one to the other. 'It is accepted as approximately correct that a laboring man needs 3,200 calories to enable him to do his day's work, while the working woman needs about 2,700. These figures are higher than those adopted by some authorities, but the fallacy of using the caloric value as a standard is shown by the one standard as easily as the other. For instance, according to tables credited to Professor Langworthy of the United States Department of Agriculture Experiment Stations, doughnuts have a value of 2,000 calories per pound, chocolate cake 1,650, oyster crackers 1,965,—whereas rye bread has only 1,115 calories per pound, brown bread 970, canned baked beans 600, fresh peas 465, oat breakfast food (whatever that is) 280, and spinach 110. White bread is valued at 1,180 calories per pound and whole wheat bread at only 1,110. Therefore the ordinary housewife or provider is fully justified in deciding that a diet of doughnuts, chocolate cake and oyster crackers is vastly superior pound for pound to a diet of rye bread, brown bread, baked beans, green peas, oat breakfast food and spinach, whereas the testimony of experience would seem to show the reverse to be true. White bread with its caloric superiority over whole wheat bread would also naturally be preferred to the latter. *It cannot be too strongly emphasized that caloric value is simply one element to be considered in estimating the*

*food value of anything.* As will be referred to later, polished rice, which has a higher caloric value than the simple hulled rice, has killed many thousands of people, a mortality wholly unknown under a natural hulled rice diet.

*Why do we eat ?* With a rational conception of food as a substance capable of being transformed into protoplasm and maintaining its efficiency, the answer to the question, "Why do we, or Why should we eat ?" is not far to seek. To be an epicure, to be a gourmand, to be gluttonous, or to live to eat, is not ennobling—and it is acknowledged by common consent that to be either is to lay the foundation for many of the ills flesh is heir to." One's life would be simplified, living expenses would be reduced to a minimum, intricacies and difficulties of housekeeping would be greatly decreased, the "high cost of living" would become an historic phrase only, doctors' bills would be less frequent and embarrassing, and the general comfort, ease of mind and essential happiness of mankind would be greatly augmented, if people would allow a truly intelligent and rational answer, an answer creditable to humanity, the highest form of created life, to the question, Why do we eat ? to guide them in things dietetic. Instead of eating "because meals are ready," or "because it is time to eat," or to gratify a sensuous desire, to please the palate with fascinating flavors, to stimulate the appetite, *one should eat for the prime purpose of maintaining and increasing his efficiency, his endurance and his resistance.* With

some such idea in mind, it becomes not only easy to overcome dietetic temptations but one sooner or later eats with a keen relish and steady enjoyment not experienced by the gourmet.

To realize what it is that we feed when we eat, also helps us at times to decide what we should eat. A little common sense argument is usually enough to convince us that even the most intelligent human being is simply feeding an animal body when he eats. The human being may possess wonderful powers of mind and spirit, but it is the body and its tissues that are fed. People never or rarely realize that what they are eating is developed into blood, bones, muscle, connective tissue, glandular epithelium and nerve tissue, etc. If they could realize that healthy brain, and heart, and muscle tissue can be obtained *only* by eating suitably proportioned food it would help them to refuse many things which the merest tyro in dietetics recognizes as unsuitable. Man feeds his domestic animals according to the amount and kind of work they have to do, and feeds them with the definite idea of producing efficiency. *Some of his knowledge and common sense he should apply to the feeding of his own body.*

*What has Nature provided for man?* It is matter of common knowledge that Nature has anticipated and provided wisely and generously for the needs of all forms of life. Birds of the air, beasts of the field and fish of the sea have been provided for, but it is necessary in each case for the animal to make some individual effort to secure the food that has been pro-

vided. By analogy, it may be claimed that the same Nature has provided those forms of food which may be transformed into healthy human protoplasm and maintain its efficiency. There is known to mankind a long list of edible grains and vegetables and fruits and berries and nuts all of which differ somewhat in kind, and all of which furnish some necessary ingredient of the human body. Nature sternly requires of man that he make some effort to acquire these things, but man does not grow a potato, a grain of corn, or a melon. He can and must plant the seed and cultivate the crop and accept the harvest as a reward of labor, but it is Nature, not man, that produces the wonderful and unfailing combinations which characterize the forms of food mentioned. It is after Nature has done her part that man's art steps in to produce combinations and results which in the majority of cases actually thwart Nature in her efforts to produce strong and healthy bodies. *The art of cooking has probably become one of the most dangerous of the arts.* Man's ingenuity and cleverness are doubtless exhibited as clearly in his ability to modify Nature's foods as in any other of his accomplishments, and it is not an unusual experience for a physician to have to treat cooks and teachers of cooking for gastrointestinal and constitutional difficulties unquestionably attributable to their vicious diet. Once more, one may know a great deal about cooking and yet know nothing whatever about diet. The two things are not by any means synonymous, yet as a rule no distinction between them is made.

*Keeping qualities of grains.* As far as physiological chemistry can help us out, we are justified in claiming that everything necessary to insure the growth and maintain the integrity of healthy human bodies may be abundantly found in the vegetable kingdom. Water alone is in some instances needed to complete the balance. Among the grains particularly, such as wheat, oats, rye, barley, corn, and rice, we find in concentrated form everything in the way of starch, fat, sugar, protein and minerals to supply, after the earliest periods of life, the needs of the growing or fully formed body. The ease with which these foods may be kept free degeneration and contamination, and the length of time they retain under suitable conditions their own vital principles are points that seem to me very significant. Nothing in the realm of food has such keeping qualities. No pickling, salting, smoking or cold storage are needed to keep them sweet and wholesome. Many of the edible nuts possess these keeping qualities. Many of the vegetables and fruits can be kept for a season without difficulty, although many of them rapidly deteriorate when ripe. If we can interpret Nature's motives as evidenced by the keeping qualities of food it is certainly reasonable to claim that the grains should form the chief articles in man's diet. As a matter of fact they do, for there is nothing used so universally and liberally as the various forms of grains. The familiar phrase "Bread is the staff of life" may not be literally interpreted to mean the modern white bread, but

in all probability it does signify literally, cereal food.

*Defective teeth.* Let us now briefly consider a few of the common conditions of unsound or ill health that are acknowledged to be due to a faulty or unbalanced ration : First, defective teeth. Our modern school inspectors are insistently calling attention to the defective teeth of school children. Dr. McCann claims that there are 10,000,000 school children in the United States with defective teeth. This means insufficient mastication and a wrong initiation of the digestive process ; it means an insufficient or faulty development of the maxillæ and the resulting indigestion, which is trivial to start with, but becomes, as the years go by, a more and more serious condition interfering with the development of a robust body and producing in many instances mental and moral defects. It is worthy of note that in Boston, a wonderfully complete institution has been established by philanthropically inclined and generous-hearted men known as the Forsythe Dental Infirmary for Children ;—an institution which by the large numbers that patronize it evidently meets a “long felt want.” That is, the evil results of defective teeth are fully recognized and efforts to overcome these ill results are being made. The all important question, however, is, “Why the defective teeth ?” The answer is simplicity itself. The so-called “food” that children are brought up on consists of a vastly preponderating amount of starch and sugar. Examination of the lunch boxes of school

children shows them to contain white bread, jam, jelly, preserves, doughnuts and varieties of cakes. This gives an idea of what children eat for their lunches, and it is only fair to assume, and a little investigation proves the truth of the assumption, that children are "brought up" chiefly on starches and sweets. Nature is wonderfully clever and ingenious, but Nature never has been able, and never will be able to transform carbohydrates into the lime salts that are needed to furnish good bones and sound teeth. It is a simple proposition that if the lime salts are abstracted from food in its manufacture or cooking, the children will not have the lime salts wherewith to make these necessary structures.

*Slow dentition in babies.* It is a frequent experience that modern babies are slow in teething. This may be due to an insufficiency of lime salts in the milk that is fed to them, but it may also be due partly to an inherited weakness which is the result of an insufficient quantity of lime in the mother's dietary. In this connection it is reasonable to refer to the deplorable fact that the modern mother, if she belongs to what is known as the "better classes," is usually unable to nurse her young in spite often of an earnest desire to do so, and has to resort to some of the modern makeshifts. This is in all probability due to no fault of Nature, but to those faults of our civilization which demand delicacies and luxuries as food, rather than the simple products of Nature herself. Assertion is not proof, but it is found that among simple



peoples and among those whose circumstances in life compel them to use a simple diet devoid of the dainties and luxuries of prosperity mothers are almost invariably able to nurse their young, unquestionably to the very great advantage of their offspring.

*Obesity.* Another condition worthy of consideration is the very common one known as "obesity." Just where a normal rotundity or plumpness of figure leaves off and obesity begins has not been authoritatively decided. As a standard of proper weight, however, we might take the skeleton itself with its muscles; connective tissue, special and glandular organs and a necessary amount of adipose tissue to answer the few mechanical and physiological purposes it is probably intended for. It is apropos to note that an individual's bones are not bigger at fifty than they were at twenty to twenty-five; that the muscles of the body are usually not as large in a man of fifty or sixty as they are in a vigorous youth; that the liver and glandular organs are certainly not appreciably larger after middle life than they are at the period of maturity; that the brain certainly is no larger at sixty than it is at twenty-five. Why then should it be looked upon as desirable that a person should take on aldermanic outlines and proportions by midlife? Why should a person fifty years of age have forty, fifty, sixty or more pounds to carry about than he had at twenty-five? It is easy to prove that this extra weight is a physical and physiological burden.

*(To be continued.)*

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV. ]

OCTOBER, 1915.

[ NO. 10.

---

## DENGUE.

• It is also called Dandy fever or breakbone fever ; because in this disease intense pain is felt in various parts of the body. It appears in an epidemic form. It is a continued fever. Many people believe it to be infectious or contagious in character.

A kind of measly eruptions appears all over the body. It may be at first confounded with scarlet fever.

It is attended with headache, pain over the whole body, more especially in the hands and feet or all the joints. Patients walk with a peculiar gait, so it is called Dandy fever.

Various kinds of after diseases are noticeable. It is not dangerous to life. After a period of eight or ten days it disappears. Many people believe that when a person is attacked with this disease once, there

is no likelihood of his getting it again. But we have seen repeated attacks in one person.

*Symptoms.* Attack is sudden. First, nausea, vomiting, headache, pains in body and then chill or shivering. The joints are inflamed and painful. Glands in neck, axilla and groins become hard and swollen, sometimes testicles are affected.

Catarrhal symptoms make their appearance either from the beginning or at a later period of the disease. Intense headache, pain in eyes, skin warm and dry, pulse frequent, small and weak ; face red ; eyes red and full of water, water coming out of nose ; tongue clean and red ; loss of appetite, but great thirst, constipation. On the third day, the fever assumes a remittent type. Later on, the fever increases and nausea, heat in the body and red eruptions appear. These eruptions are bright red and appear first in the palm of the hand and then throughout the whole body. Now the fever abates. These vary in various epidemics. They are sometimes like measles, at other times resemble chicken pox.

If the disease is not very severe, it will end in a week's time. Even after the disappearance of the disease, the patient remains weak and feeble for some time. We have seen in many cases rheumatic pains, myalgia, neuralgia and extreme debility develop.

*Prognosis* is generally favourable. Death-rate is very low. Most cases recover. In rare cases adynamia supervenes, heart is affected and the poor patient dies of collapse.

*Treatment.* *Aconite* is one of the efficacious remedies in this disease. In Inflammatory stage high fever, pains in body, dry skin, frequent, hard and quick pulse, and rheumatic pains are the leading symptoms.

*Eupatorium perfoliatum.* Dr. Mohendra Lal Sarcar made use of this remedy with great success in the first epidemic of Dengue in Calcutta years ago. Pains in body, as if it comes from the bone ; fever, pulse frequent and full, great thirst and vomiting of bile.

Many people believe it is one of the best remedies in Dengue and we also share the same opinion.

Symptomatic similiarity is very great.

*Bryonia.* Rheumatic pains, aggravated by least movement ; fever ; great thirst ; eruptions, joints inflamed and swollen.

*Rhus tox.* Intense restlessness, patient cannot remain in one position for a minute ; joints swollen, thirst, fever increases at night.

*Gelsemium.* It is a good remedy in the first stage of the disease. High fever, drowsiness ; myalgia ; slight delirium.

*Belladonna.* Useful in many cases, Intense headache, delirium, thirst and rheumatic pains appearing and disappearing suddenly.

We have derived some benefit from Arsenic in the first or catarrhal stage and in the later stage when heart becomes weak.

For crampy pains in various parts of the body *veratrum album* should be thought of.

For metastasis in the testes, Clematis and Mercurius are best. Phytolacca is to be thought of for the after effects pains, swelling &c.

Light food in the beginning. .

P. C. M.

---

## FOOD AS A CAUSE OF DISEASE.

(Continued from page No. 288 Vol. XXIV.)

It requires more force to propel it from place to place ; it requires more cardiac energy to keep the blood circulating through the increased tissue, and this leads up to possibilities in the way of cardiac hypertrophy, and arterio-capillary fibrosis and its attendant dangers. The portly and unwieldy figure of the obese is in many ways a handicap and the unfortunate individual frequently seeks medical advice and resorts to various kinds of treatment for a reduction of his weight. Many of the methods in vogue for the reduction of surplus fat may be harmless in themselves, but frequently are expensive and use time that might be used to better advantage. It is curious that people eagerly seek some method for the reduction of flesh aside from the *only simple and natural method of abstinence from fat-forming foods.* Ages ago the Israelites in Egyptian captivity complained because they were expected to make bricks without straw. It is self-evident that adipose tissue cannot be made without those things necessary to its production, such as fat, sugar and starch. Natural, simple, preventive measures do

not appeal in this instance, any more than in others, to a mankind that is filled with his own conceit and that likes to do things his own way.

*Constipation.* Another common ill, that of itself and with the addition of its usual treatment leads on to more serious consequence, is constipation. Its pathology and sequelæ and discomforts need not be referred to. It is well known that many hundred thousands of dollars are annually spent in this country of ours in the manufacture and purchase of aperients, laxatives and cathartics. In this case we have as a prime factor in the production of constipation, a faulty diet. The main fault lies in the removal to a large extent, often as completely as possible, of the cellulose found in the grains, vegetables and fruits ; and in the insufficient drinking of water. The false and irrational notion too widely obtains that "coarse" food is irritating and injurious to the bowels. Therefore basing his actions upon an erroneous idea man attempts to improve upon the food furnished by nature, with the usual result of disaster. But it is so much easier to eat white bread, cakes, pastry, puddings and delicately prepared food made chiefly from starch and sugar, and rich gravies and dressings, thickened with starch and then take a compound cathartic, or a little liver pill, or something of the sort, than it is to make use from the start of the rational diet which is a sure preventive of this trouble. Eating too highly refined food, and overloading generally, are remediable measures. Here, as too often elsewhere, preventive mea-

tures do not appeal to humanity to the same extent that so-called "curative" methods do.

*Beri-beri.* One of the modern triumphs of preventive medicine along purely dietetic lines is in the discovery of the cause of beri-beri. Before this audience it is needless to give a detailed description of the pathology and symptomatology of beri-beri. It is enough for my purposes to emphasize the fact which has been abundantly proven that an organic disease of the nervous system which is fatal in forty to sixty percent of the people attacked, and which has been prevalent from time immemorial, is produced by the eating of demineralized or polished rice. So satisfied are our government authorities concerning this matter that, on good authority I am informed, no rations containing polished rice are issued to our troops or civil employes in the Philippines. It is unnecessary to give the accepted explanations of the part played by demineralized or polished rice in the production of this disease. The points I wish to emphasize, and the significance of which, I feel, are not at all appreciated by the average individual are, that those who eat, in large quantities, demineralized or polished rice are the ones who suffer from beri-beri; and the negative fact that those whose lack of affluence prohibits their using the luxury and compels them to use the natural product do not suffer from beri-beri.

*Cause of insanity, cancer, etc.* A question which is before the profession for settlement and one toward

the solution of which the brightest minds and the most serious efforts should be directed, and one which I am anxious to bring to the attention of this body, is, What is the main cause of the American disease "nervous prostration," the increasing prevalence of insanity, and the appalling frequency of cancer? Unquestionably there are varying exciting causes for these conditions, but to my mind it is not at all irrational to claim that the predisposing cause, as in the case of germ diseases, is more potent than the exciting, and it is a conviction of mine that the predisposing causes, in many cases, of these serious disorders are self-induced, if not by the immediate sufferer, at least by his immediate predecessors, and that dietetic errors are mainly responsible for the development of these predispositions. Of course, I am not prepared to make the assertion that this is so, but I am convinced on reasoning by analogy, and analyzing such experience as has been made possible to me, that a thorough examination of all the data connected with a large number of nervous diseases, insanity and cancer will ultimately reveal the fact that impoverished nutrition, or a physiologically unsuitable diet, is responsible for the feeble resistance or the susceptibility which permits these diseases to establish themselves in the human body.

- *Wheat flour.* It is not intended to make any sensational or extravagant claims concerning the disease-producing possibilities of what people call "food," but which is in reality an *unbalanced ration*:



In the light of the present-day knowledge, or in the darkness of present-day ignorance, one is not justified in making positive claims or assertions except in a few instances. It is perfectly proper, however, and may make for real progress, to assume certain things as working hypotheses. I am willing, therefore, for reasons to be given, to assume that the dietetic habits of civilized man are responsible for a very large number of the diseases which afflict humanity. One of the least excusable of man's many dietetic errors is the manufacture and excessive use of wheat flour, bolted and sometimes bleached. That this widely prevalent habit is injurious has been amply proven. The caloric value of white flour per pound is greater than that of whole wheat meal, on account of the preponderance of starch, but the *impossibility of forming good bones and sound teeth out of a white flour diet* has been referred to. Edie and Simpson (quoted by Bryce in his "Modern Theories of Diet") found that "adult pigeons fed exclusively on unadulterated and unbleached white wheat bread rapidly developed polyneuritis and died on the average on the twenty-ninth day. \* \* \* and on an exclusive diet of whole meal or standard bread, which contains 80 per cent of the wheat berry, they maintained proper health." It is a matter of common domestic experience that the flour barrel may be opened many times a day, during the hot and muggy days of summer without fear of "worms" developing in the flour, while every housewife knows the difficulty of carrying whole meal (of

wheat, oats, rye or corn) under similar circumstances without having the meal infested by "worms". That is, "worms" know enough not to try to live on (or in) wheat flour,—a thing that intelligent man has not yet found out! The "worm" knows it can thrive and enjoy productive health on the whole meals,—a fact that mankind is loath to practically acknowledge. Experimental evidence according to Bryce, and others, shows conclusively that "oatmeal, rye bread, whole rice, and barley, all of which contain organic compounds of phosphorus in varying degree, are incapable of setting up polyncuritis in pigeons, and that beriberi does not occur when rice containing a sufficiency of  $P_2O_5$ , 'cured rice,' is used."

*Summary.* In America, as is well known, we are eating white flour (partly demineralized wheat) as the staple article of diet,—in crackers, biscuits, rolls, breads, cookies, dough-nuts, cakes and pastries of innumerable description and variety, in thickenings of soups, gravies, dressings, etc.

We are eating corn starch (demineralized corn) in puddings and confectioneries.

We are eating very freely of boiled, mashed and fried potatoes, demineralized by peeling.

We are eating polished (demineralized) rice in large quantities as a vegetable, in compotes, puddings and wafers, and giving these things as delicacies to our invalids.

Now, if eating a diet consisting largely of starch and sugar is prejudicial to the formation of sound teeth

(a school inspector recently reported to the writer that he had that day examined thirty-five children averaging five years of age and had found only two who had sound teeth),

If eating too refined food is largely responsible for the universally prevalent constipation with its frequent chain of sequæ,

If eating too freely of carbohydrates and hydrocarbons is, the *sine qua non* in the production of obesity with its discomforts and dangers,

If eating demineralized rice without restriction is the cause of beri-beri (and who can doubt these things and much more in the same line that might be stated),

*It is a very extravagant assumption to suggest that the cause, or at least one of the main factors in the etiology of insanity and cancer and a host of diseases, is in man's demineralization and modifications of the diet provided for him by Nature ?*

It is certainly an interesting clinical experience that invalids suffering with various forms of nerve disorders, unwittingly produced by eating demineralized food, consult their physicians, who after thorough investigation of their conditions prescribe some of the large number of phosphates, phosphites, hypophosphites, etc., used by common consent as the most effective pharmacotherapeutic agents in restoring such cases to health : the very things that have been removed from wheat in the manufacture of white flour.

It is impossible in the brief presentation of a subject, such as is allowable on an occasion like the

présent, to do more than to suggest lines of argument. Details are not permissible. Arguments against the use of meat foods, and against the deplorably common use of cane sugar sweets, might be advanced and discussed possibly with profit, but I shall be contented if my remarks on Food as a Cause of Disease have served to quicken your interest in what is most surely of vital import to us all.

—*The Journal of the American Institute of Homeopathy.*

---

## ABUSE OF HOMEOPATHY.

It will be admitted on all hands that Homeopathy cannot be properly studied in India. The cause of this must be alluded to the want of regular Homeopathic Colleges with efficient teachers and adequate appliances. Calcutta is the only centre in India where Homeopathy has been appreciated. But factitious spirits and selfish purposes have greatly hindered our progress. Of course, the non-recognition of the Government and the hostile attitude of the domineering school are to be taken into consideration. The movement which the Government does not support and encourage can scarcely thrive. But it can't be gainsaid that the organizers of the Homeopathic Institutions in Calcutta are greatly to be blamed for the abuse of the Science in India. They are too lavish and too careless in fulfilling their

duties even when they hold the helm of the most responsible mission on earth. The deterioration of Homeopathy indicates their negligence and incapacity.

Homeopathy is regarded as an inferior science by many and superior by a few to Allopathy, and in 80 p. c. of the cases of emergency, it is not relied upon, why it is so? This is not solely due to the indifference of the Government, nor to the party feeling of the Allopaths, but mostly due to the procedure which Homeopathy has chosen in the hands of Homeopathic practitioners.

Homeopathy is the most modern of the medical Sciences, and it has been embraced by the greatest geniuses of many countries. Those who profess it to be mysticism have not either been acquainted with it, or they are sceptic. It is a Science in the truest sense of the term, the result of the life-long experience and experiment of the greatest medical genius of the 18th century.

The Government of India has ere long been trying to make the Medical Registration Bill a law, and if it succeeds, that will have a very good effect upon the medical treatment in a country like India where anybody and every body can become a physician in a day, But in Homeopathy no such stringent measures will be acceptable, and we get as the result doctors in every house; they are all self-made.

Any one who will look into the first two or three

pages of the "Organon" will be fully convinced of the duties of a physician, elaborately and emphatically laid down by our master. Health and life of the human beings are the objects, where the tactics of a physician is tested. And these are not to be regarded as toys. What is this world without sound health in a sound body? Nothing but a dreary dungeon of hell. So comes out the physician with his laws of prevention and cure of diseases, transforming them into practical aid for his fellow-brothers.

Now, if there be want of discipline among these people, whose mission is the highest in the world, people will surely suffer at their hands.

Homeopathy has undergone a series of degeneration during the last fifty years of its existence in Calcutta, and there is no one who cares to revive it. We cannot say who there had been that preached the doctrine that Homeopathy is at least harmless, if not efficacious, in treating a disease, and even ladies in a family can safely use Homeopathic medicines. Is there any homeopathic doctor who can testify to this absurdity?—who knows what is the cause of aggravation of a disease treated homeopathically? It is a scientific truth that where there is light, there must be darkness; where there is pleasure, there must be sorrows; the contradictory phenomena go hand in hand. So, if the people do admit that Homeopathy can do good, they cannot but take it for granted that it can do harm too.

I do not like to deal with the matter in detail, but

I like to refer to the people to become conversant with those chapters of "Organon" in which Hahnemann has dealt with the efficacy of drugs used homeopathically and in infinitesimal doses. It has often been observed that the injury caused by the wrong use of homeopathic medicines could not be modified by any sort of treatment.

Homeopathy is being practised by anybody and everybody, simply looking at a Bengali book, and the practitioners in their everyday practice have to confront great difficulties in their practice in order to rectify the evils caused by the so-called prescribers.

For this great misuse of Homeopathy both the Homeopathic Schools and the druggists are to account for. These behave in a manner which is really offensive and objectionable. The Homeopathic Schools are too liberal to accept anybody and everybody in their classes without looking at their qualifications. I have seen in my class students who cannot understand English, and yet they sit in the class, hear the learned lectures by the Professors, and come out successfully with diplomas. These people come out into the field to practise a Science which they could not digest in their School life, and so arise the evil effects which Homeopathy does not deserve. These people preach Homeopathy in a light which Homeopathy has not got, in order to maintain their profession, and so absurdity, mysticism and un-belief characterise our magnificent law of cure.

The shop-keepers too have made Homeopathy

a subject of public ridicule, in the sense that some of them sell medicines at a certain rate and others at a different. This surely creates an unfaith among the people, and the Doctors have always to face a good deal of difficulties in order to explain such a peculiar phenomenon to their patients. Of course, the cheaper the medicine is, the more convenient will it be to the poor people. But if for the sake of profession the shopkeepers create a disbelief among the masses, Homeopathy must suffer in the same way in public estimation.

It is not that the so-called prescribers with those low-priced medicines do not cure cases almost without any cost, where a regular treatment would have cost a great deal. But it cannot but be admitted that their failures are greater than their successes. And this must naturally be, as all of them are not true homeopaths. So such a procedure should not be encouraged when Homeopathy sustains a bad reputation at uncultured hands.

The Homeopathic Schools as well as the Homeopathic chemists, therefore, should try to relieve their science and art of treatment of the calumny which has befouled its good name through their negligence and selfish motives. It is not a commercial business but a beneficent science. The leaders of homeopathic movement in Calcutta should come forwards and kill this evil in the land,

NARENDRA NATH ROY,  
Kalighat.

---



# KALI MURIATICUM, KALI PHOSPHORICUM, KALI SULPHURICUM.\*

BY WALLACE McGEORGE, M. D.

Camden, New Jersey.

The indications for three of Schüssler's Tissue Remedies to be emphasized, and to which other indications can be added at convenience, are : Kali mur. is useful in croup, diphtheria and in chronic joint affections ; kali phos. in brain and spinal lesions, and acute rheumatism ; kali sulph. in diseases of the skin and chronic complaints of the respiratory organs.

- Among the mineral remedies the mercurial preparations were formerly the favorites. Now it is more likely the potash group are oftener prescribed. Kali mur., kali phos., and kali sulph. have been assigned to me, and I will now briefly give you some indications for their use.

"KALI MURIATICUM is chloride of potash, and should not be confounded with chlorate of potash." Dr. Geo. W. Carey writes : "The clinical symptoms of potassium chlorate of which we have provings by Martin and Tully are deemed sufficiently similar to those of kali muriaticum, Schüssler's tissue remedy, to be included herein." Hering writes in his Guiding Symptoms : "I am not sufficiently expert to say who is correct but what I have written about this drug or salt I know to be true."

In headache, with thick white coated tongue, or hawking of thick white mucus, kali mur. is helpful. In bronchial affections, when there is an accumulation of mucus on the lungs, with wheezing or whistling sounds in the chest, kali mur. will relieve in a few hours. In chronic cases, the effect is slower, but none the less permanent. It is good, very good in clearing out the nasty, sticky secretions in the respiratory organs.

Carey says kali mur. is "the chief remedy in diphtheria, and if given early, in alternation with ferrum phos. in a majority of cases, it will be all that is needed." He recommends a gargle (ten or fifteen grains in a glass of water) to control the plastic exudation. "In fourteen cases kali mur. rapidly made a change, the whitish grey exudation being diminished, shriveling and coming away with gargle and mouth-wash."

In chronic cystitis, with discharge of thick, white slimy mucus, it follows well after chimaphila, and frequently completes the cure. In some of these troublesome cases, with thick, gelatinous exudate, adhering to the bottom of the vessel, after pipsissewa and arbutus have done what they could kali mur. will help greatly, sometimes complete the cure and make the long suffering patient feel grateful.

It is said to be a specific in gonorrhœa and in orchitis, from suppressed gonorrhœa, but cannabis sativa, 30 in the first named disease, and pulsatilla or clematis in the last named trouble have helped so many times, that I have not prescribed kali mur. for either

of these miserable conditions. Carey says kali mur. is the principal remedy in gonorrhœa, when there is swelling of any of the parts, with a discharge of thick, white or yellowish white pus.

In leucorrhœa with thick, milky-white, non-irritating discharge, and in ulceration of the os and cervix uteri, with similar secretions, it will work well.

It is good in rheumatism of any part of the body where there is swelling, if the tongue is white coated. I have found it more useful in chronic rheumatism and swelling of the joints—notably the finger joints we so frequently see in elderly people. I usually give a tablet of the sixth potency every three hours, and have observed that it just relieves the heat in the joint, next the pain, and lastly but more slowly reduces the hardened concretions. It is a safe remedy to give continuously, for days and weeks to overcome the stiffness in these enlarged joints and then to soften them somewhat. In acute inflammatory rheumatic conditions, bry. 2, or bry. 3, will work more quickly. Kali mur. is good in glandular swellings, but mercurious solubilis, in the high potencies, acts quicker.

In catarrh, extending to the eustachian tubes, and in deafness from inflammation and closure of the eustachian tube, kali mur. is very useful. For absorption of fluids in the pleura it comes next to sulphur according to Nash. As sulphur high has always cured my cases, I have had no opportunity to try it.

Farrington says it is just as efficient an antidote to mercury as potassium iodide when the mercurial

poison has developed a sort of scorbutus, and the gums are spongy, soft and bleed easily ; when there are ulcers of an aphthous character in the mouth and throat, and fœtor of the breath.

In asthma accompanied by constriction of the chest, which is relieved as soon as the patient can expectorate kali mur. will do nicely. Cadmium is better when the constriction is in the esophagus. Castus is oftener indicated when the constriction is around the heart or chest but it is good in constriction of any of the internal organs.

The modality of being worse after eating fats, pastry, or any rich food, reminds of pulsatilla. The aggravation from motion, which increases all the pains, resembles bryonia.

KALI PHOSPHORICUM is a wonderful remedy for the business man who uses his brain constantly, and takes very little exercise. Good in brain fag. Carey says : "Kali phos. is the most wonderful curative agent ever discovered by man, and the blessings it has already conferred on the race are many. When physicians everywhere fully understand the part this salt plays in the processes of life it will do as much as can be done through physiology, to make a heaven on earth." "Let the overworked business man take it and go home good tempered. Let the weary wife, nerves unstrung from attending to sick children or entertaining company, take it and note how quickly the equilibrium will be restored, and calm and reason assert her throne."

When secret society men, who "are going through the chairs," become nervous and fearful of breaking down, and are unable to deliver their charge, kali phos. will put new life into them, and enable them to pass this ordeal creditably. On March twentieth I gave kali phos. 6x to a clerk suffering from brain fag and dread of breaking down in his ritualistic work, a dose three times a day. April tenth when he returned he reported great relief, says his head is better, his thoughts are clearer, he can do his work better in his office and enjoys his part in initiations. All the fear, the diffidence he had when he came for treatment, are gone.

In rheumatism kali phos. resembles rhus in being relieved by gentle exercise, while kali mur. is like bryonia, in aggravation from motion, no matter how gentle.

Kali phos. is good in paralysis of any part of the body, partial paralysis, hemiplegia, facial paralysis, etc. When nux fails you turn to kali phos. It is also recommended in creeping paralysis of the vocal cords, causing loss of voice, but I have relied on causticum, Hahnemann's antipsoric and it has served me well. But then causticum is in the potash group. If the other symptoms of the case were covered by kali phos. then kali phos. should be administered.

Dr. I. Martine Kershaw, of St. Louis, recommends this salt in spinal neurasthenia, in spinal anaemia from exhausting disease such as diphtheria, in reflex paraplegia with gnawing pain, aggravated by rest, but

most manifest on beginning to move about, resembling rhus.

We have cited kali mur. as being so useful in diphtheria but when we have extreme exhaustion or prostration after diphtheria, nasal speech, paralysis in any part of the body, as sequelae to diphtheria, kali phos. is the remedy to give our patients.

Hering quotes it as being useful in obstinate enuresis and in incontinence of urine from paralysis of the sphincter.

Raue in his Annual for 1874, says kali phos. acts upon the spleen, and is good in scurvy in typhus, and in putrid states.

In closing on kali phos. let me remind you that Kent says kali phos. often cures a peculiar symptom and a very unpleasant one for the patient and those who have to live with her—horribly offensive odor of the leucorrhoea, so penetrating that the whole room smells of it. Hepar sulphur also cures putrid offensive odor of the vaginal discharge, but not in as marked degree as kali phos.

**KALI SULPHURICUM.** Kali sulph. is a wonderful skin remedy. We have no other medicine that will open the pores of the skin as permanently as this one, yet aconite will make the patient sweat quicker. In dryness of the skin, from suppression of the eruption in measles or other eruptive diseases, kali sulph. is the remedy par excellence. In dryness of the skin from debility or general weakness, arsenicum in the higher preparations will be the better choice.

Raue says kali sulph. acts upon the epithelium and epidermis. In cystitis with discharge of yellow, slimy matter from the urethra, in the third stage of the inflammation, it is useful. In kali mur. the discharge is thick and white.

It is good in chronic catarrh if pulsatilla does not cure. Also in bronchitis, in whooping\* cough, and in chronic pneumonia, where there is much rattling in the chest. The mucus in the chest becomes looser, and the rattling ceases.

In epithelioma of the face, in alopecia, in rheumatic fever, in rheumatism from getting wet, in whooping cough in the last stage, kali sulph. should be considered and if the other symptoms present are similar it can be given without hesitation.

Nash says it resembles pulsatilla in a number of its symptoms, and being a deeper acting remedy is useful to complement that remedy. He cites the following similarities : First, yellow or greenish discharge from mucus membranes. Second, evening aggravation of fever symptoms. Third, amelioration in open air. Fourth, rheumatic pain in joints or any part of the body, of a shifting, wandering nature, Fifth, aggravation in a heated room. Sixth, loose cough with rattling of mucus.

Hering recommends it highly in cases of ivy poisoning (rhus tox.) when the patients have been troubled with it for months. The sense of taste and smell have been restored from its use, and it has been found useful in catarrh involving the antrum of Highmore.

In sores on the skin, exuding a thin, yellow, watery matter, in dry, hot and burning skin, in scarlet fever, measles, variola, when the rash has been suppressed, it is useful. It aids desquamation in eruptive diseases, and helps in the formation of new skin.

Finally in many old cases of redness and dryness of the skin, in eczematous or erythematous troubles, when the patient is not pleasant to look at, in dry, scaly, red appearance of the face, arms and hands, kali sulph. will help many, many times.

---

### BRYONIA\*.

By J. MUMFORD KEESE, M.D.

*Syracuse, N. Y.*

What does bryonia mean to the average practitioner of the Old School? Absolutely nothing in daily practice, as was elicited upon questioning a capable internist. An extract from an editorial utterance on the treatment of rheumatism says that "where the serous membranes do not properly react to the usual drugs, many authorities are inclined to a mild use of the hydrogogue cathartics, bryonia in carefully ascending doses being preferred, because of its action on the serous surfaces. This drug seems to be justified in cases badly stiffened up and suffering pain from motion." Of course, the dominant school do not know what

---

\* Read before Homoeo. Med. Soc. of State of N. Y.



they have lost in not being acquainted with the virtues of this remedy. How are we enriched by the labors of those who observed, in their study and provings, the action of this drug ?

Bryonia is one of the oldest remedies in the homeopathic materia medica, and is one of the best proved. It was proved by Hahnemann and published in 1816 with 208 of his own symptoms, and in 1824 the second volume of the second edition was published with 537 of his own symptoms. Bryonia is a polychrest, and because of its leading modality is capable of relieving sufferings of almost any and every kind ; therefore no apology is needed for again calling to mind and emphasizing its leading characteristics as stated by such men as Farrington, H. C. Allen, Nash and Cowperthwaite.

Bryonia acts especially and powerfully upon the serous membranes and the viscera they contain, more particularly the pleurae and lungs ; next the brain, and finally the liver. Then comes the action upon the synovial membranes and muscular fibre, and last upon the mucous membranes of the respiratory and alimentary tracts. The condition may not be one of acute inflammation, but rather sub-acute, more closely simulating that condition when infiltrations, exudations or effusions are about to occur, the symptoms indicating a state intermediate between inflammation and nervous irritation. When, however, the synovial membranes and muscular fibres are involved, the inflammation partakes more decidedly of a rheumatic or arthritic

nature, and possibly this condition may be said to always characterize the bryonia inflammation, regardless of the tissues involved. The most characteristic expressions of bryonia are its stitching, tearing pains, and the aggravation of all its symptoms by motion.

Bryonia is a useful remedy in headaches of a rheumatic or congestive character. They are always worse from motion, even moving the eyeballs causing an aggravation. They are most often located in the occiput, but may be frontal, and may appear when awaking in the morning, and are worse after violent fits of anger. The nearest remedy that we have to bryonia here is gelsemium, which has headache with this soreness of the eyes on moving them, but not so general an aggravation from motion. There is also a dull throbbing headache over the frontal sinuses as a result of the sudden suppression of the characteristic thick yellow coryza.

Very frequently the headaches aid in selecting bryonia in intermittent and remittent types of fever. It may also be useful in scarlet fever or measles when the eruption does not develop well or has been suppressed. In the incipient stage of measles it is often indicated, and is almost a standard remedy. Bryonia is often indicated in typhoid, especially in the prodromic stage, where there is great lassitude or weakness. Pains in head, back and limbs worse on moving; white-coated tongue, dry, parched lips and mouth, with or without thirst for water in large quantities at a time; restless sleep, accompanied by dreams of

business tiring him out, and particularly when the patient does not wish to move, as all of his bad feelings are greatly aggravated by it.

Bryonia is one of our most valuable remedies in the treatment of serious inflammations, especially of the pleura, in which it is probably more often indicated than any other drug. Also in meningitis and synovitis. It may be indicated at the outset of the disease, but more often after the violent inflammatory symptoms have abated and exudation is about to occur. There are deep stitching pains worse from any motion. It follows aconite well after conditions indicating the latter have been subdued. The common practice of alternating aconite and bryonia in all cases of acute pleurisy is unnecessary and unscientific. In pneumonia and bronchitis and sometimes in laryngitis, bryonia is invaluable. In pneumonia the type in which it is indicated is the true croupous form. As in pleurisy, it is called for early in the disease, but usually not until the extreme high fever and restless state have been subdued. There is a dry, rough cough, with but little expectoration, that being mucous in character. The patient feels better when lying on the affected side and keeping perfectly quiet, and thus showing another valuable modality,—amelioration from pressure.

Bryonia is a valuable remedy in gastric derangement. The tongue is thickly coated white, dryness of mouth and lips, bitter taste, nausea and vomiting, and a feeling as though a heavy weight or stone were lying in the stomach. Gastric catarrh and hepatitis

may be mentioned. A valuable remedy in constipation with the characteristic large, hard, dry stool. It may also be useful in summer diarrhoea brought on by the use of vegetable food or cold drinks, or by getting overheated. It seems that the bryonia patient cannot tolerate the heat of the sun.

Bryonia viēs with hamamelis and pulsatilla in vicarious menstruation especially when nosebleed takes the place of the menses.

Ovaritis with stitching pain ; pelvic congestion as a result of suppression of menses. Suppression of lochia with bursting headache. In mastitis, when the breasts are pale, hot, hard, heavy and painful, bryonia will give positive relief. It will often assist in establishing the flow of milk following confinement.

As far as temperament is concerned, bryonia is like nux vomica, but bryonia has much more of the rheumatic tendency. Both are easily irritated or angered, and both are aggravated generally on motion, but bryonia very much the more so. Bryonia, ledum, colchicum and nux vomica are the four leading remedies which have aggravation from motion.

Last, but perhaps most important of all, is the use of bryonia in rheumatism, and rheumatic and arthritic inflammations in general. It is one of the few drugs which produce a positive inflammation of the muscular substance. The muscles are sore to the touch, and at times swollen, and as in all complaints there is aggravation of the pains from slightest motion. In articular rheumatism we find that the fever is not very vio-

lent; and the pains and swelling either do not shift at all, or else very slowly. The local inflammation is violent; the parts are very hot and dark or pale red; better from warmth and worse from motion. Bryonia is frequently indicated in pericarditis and endocarditis in the stage of exudation.

—*The North American Journal of Homeopathy.*

---

### Notes.

1. Unless and until a physician realizes the true spiritual nature of the disease and spiritual nature of the remedy, he can not be called a true physician of the real healing art. Hahnemann fortunately realized their eminent truth and so he is designated a true physician and his system of medicine is called the real system of healing art.

2. We have been very often puzzled with cases, especially those suffering from chronic ailments, drugged enormously in previous treatment with allopathic or kobiraji medicines and we are at a loss to know what to do. Here Hahnemann's advice in the *Organon* is very useful. He says in para 91—"The symptoms and feelings of the patient during a previous course of medicine do not furnish the pure picture of the disease; but on the other hand, those symptoms and ailments which he suffered from before the use of the medicines, or after they have been discontinued for several days, give the true fundamental idea of the original form of the disease, and these especially the physi-

cian must take note of. When the disease is of a chronic character, and the patient has been taking medicine up to the time he is seen, the physician may with advantage leave him some days quite without medicine, or in the meantime administer something of an unmedicinal nature and defer to a subsequent period the more precise scrutiny of the morbid symptoms, in order to be able to grasp in their purity the permanent uncontaminated symptoms of the old affection and to form a faithful picture of the disease."

Hahnemann does not remain quite satisfied with giving no medicine but in cases of emergency in serious nature of drug and natural disorder he advises us to go on as laid down in the next para 92 which runs thus—

"But if it be a disease of a rapid course; and if its serious character admit of no delay; the physician must content himself with observing the morbid condition, altered though it may be by medicines; if he can not ascertain what symptoms were present before the employment of the medicines in order that he may at least form a just apprehension of the complete picture of the disease in its actual condition; that is to say, of the conjoined malady formed by the medicinal and original disease, which from use of inappropriate drugs is generally more serious and dangerous than was the original disease and hence demands prompt and efficient aid; and by thus tracing out the complete pictures of the disease he will be enabled to combat it with a suitable homeopathic remedy, so that the

patient shall not fall a sacrifice to the injurious drugs he has swallowed.

---

The Calcutta Homeopathic Hospital has a very good record for the last three months. Numbers of patients have increased and the management of these cases is excellent. Our Calcutta city health officer after visiting the hospital expressed great satisfaction at every thing there. Of course he, as an allopathic physician could not express any opinion about the treatment of these cases.

Very soon we are to make an addition of two or three rooms on the south-eastern block of land, adjoining the Hospital building.

---

Health of the town is excellent in comparison with the state of health of previous years. A few cases of Typhoid fever have cropped in lately and our treatment is eminently successful. Most of the cases recovered.

---

Since the opening of the Panama canal there is a fear in Calcutta, especially among the medical men that there is a possibility of an invasion of yellow fever here. The other day in our Municipal meeting Dr. Hari Dhan Dutt Roy Bahadur asked the authorities to do something to destroy the yellow fever germ the mosquitto called "*stegomyia fasciata*." His recommendation was partially sanctioned. Let us see what step they will take in this matter.

We are sorry our beloved] colleague Dr. Bipin Bihari Chatterji is in indifferent health. Though he is attending urgent calls, he is far from what he was doing formerly. He had a nervous break down for which he took some rest in Darjeeling but there was no satisfactory progress. We believe the advent of winter season would restore him to health.

---

Dr. Bhur, our resident physician of the Calcutta Homeopathic Hospital, is doing much work for the indoor and outdoor patients of the hospital. He is assisted in his work by members of the senior class of the Calcutta School of Homeopathy and Homeopathic Medical College ; some of these students, especially those from the Punjab and North Western Provinces, evidence great earnestness in learning by the bedside.

Our winter season is latet his year. In the beginning of this month we expected cooler atmosphere. It may be a precursor of sickness.

---

## CLINICAL CASES.

Head rolling from side to side ; face as white as the pillow ; cold, clammy sweat covering the body ; discharges profuse, and passing through several diapers with the ease of water ; every symptom betokens a speedy departure unless helped immediately. *Camph.* 3 cured.—*Dr. C. T. Harris.*

Cholera infantum, with coldness of body, blueness of nails and lips, cold sweat on forehead and upper



part of chest, with icy-cold feet. *Camph.* 200 cured promptly.—*Dr. C. C. Smith.*

(Cerebral Irritation. Boy aged two and one-half ; fleshy ; light hair and complexion ; blue eyes ; when sleeping, subject to scalp-sweat (*Calc.*) ; fretful ; fever and hot head ; was suddenly seized with convulsions with froth at the mouth, eyes rolled up, rolling the head from side to side ; increased heat of the whole head. After convulsions child screamed fearfully, with dilated pupils ; great agitation, with convulsive motions of the limbs (*Verat. vir.*), head and trunk. The head was very hot, and the child grasped at one's clothing in a frightened manner ; pulse rapid. *Cic.* 200 which relieved all symptoms ; some quiet sleep ensued ; cured with a few doses.—*Dr. H. V. Miller.*

(The *Cic.* in this stands for *Cicuta virosa*.)

Boy aged eight ; when at school, suddenly grasped his knee with his hands and screamed fearfully ; immediately he was seized with convulsions and insensibility, the head being permanently retracted. There was high fever ; vomiting ; dilated pupils ; double vision ; ashy paleness of the face ; one diarrhoeic stool, and then constipation. *Cicuta vir.* once in two hours to once in twenty-four hours. Cured in four days.—*Dr. J. T. Baker.*

—*Homeopathic Envy.*

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
• collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV.]      NOVEMBER, 1915.      [ No. 11.

---

## A FEW NEW AND COMPARATIVELY UNTRIED REMEDIES OF OUR MATERIA MEDICA.

Gentlemen, you know how vast and unfathomable is our Materia Medica. To master all the remedies there and to use them in our daily practice is almost an impossibility. I shall lay before you some of them whose actions I know in private practice of my own and some I have learnt from my preceptors and predecessors in this field of medical practice. I lay these before our August Society with a hope that those who know more than myself, can enlighten me about its therapeutic use, and also teach those that are new in practice. At the discussion that will follow the reading of this paper, I hope you will give us many

hints and correct any mistake I may have made. First I will speak of :—

### ADRENALIN.

It is an extract of the supra-renal bodies.

Dr. H. C. Allen says in his valuable work the Nosode in the following words, "A number of cases of Addison's disease have been cured, and other arrested in their course, by Adrenalin, these cases most of them have occurred in the practice of other School, and with large doses of the crude drug."

We have one proving of it made in 1904 by the students of the New York Homeopathic Medical College. We have the following symptoms in Addison's disease *viz.* Bronzing of the skin ; great loss of strength ; rapid emaciation ; exceeding rapid pulse ; irregular and intermittent hearts ; and general marked anæmia. Great drowsiness. Feverish flushes of heat over face and hands.

I have used this medicine in one or two cases with partial relief. In one case there were no symptoms, only the discoloration of the skin. He is partially benefited by Adrenalin 6th trit. once every morning for a week.

The other case is a typical one. He was emaciated and anemic and bronzing of the skin. He had gained in flesh and strength but the discoloration remained almost the same. He took the same potency for sometime. I noticed symptom of backache in this case. My second medicine is :—

## ANILINUM.

You know gentlemen that it is derived from aniline colors which is a hydrocarbon.

I have used this remedy several times in cases of cholera where all the symptoms of Arsenic present but it failed. Purging, vomiting, restlessness, thready or pulseless, copious perspiration and extreme prostration. My young friend Dr. Sarasi Lal Sircar then working in the chemical laboratories of the Calcutta Medical College, at my request collected some poisoning symptoms which gave me a true picture of Asiatic cholera. I request you earnestly to try this new remedy in collapse of cholera. Dr. Clarke says of it in cases of Epilepsy, cancer and bursting headache, but I have no experience in these cases.

## ANTIPYRENUM.

It is my next remedy. I have very little experience with it. On one occasion I had a very bad case of fever, pulse almost imperceptible, copious cold perspiration, in fact it is a true picture of collapse. I tried ordinary remedies without any effect, and called Dr. Salzer in consultation. He advised me to give Antipyrin 6th every 3 hours and the patient was saved.

In another case, a young boy had a temperature of 96 after the subsidence of the fever and Dr. Salzer was alarmed at this persistent low temperature and advised me to try Antipyrin, but I found no effect. Except the low temperature there was no sign of

collapse. This case got well without any medicine. I gave some food and it was all right.

#### ARALIA RACEMOSA.

I used this medicine in several cases of asthma and with marked success when indicated. The symptoms given by Dr. Clarke, I verified in my own practice. They are the following :—“Low wheezing respiration coming on immediately on lying down at midnight ; the inspiration is very loud and more difficult than expiration. Copious viscid expectoration which is easily passed, is my key note of the medicine. It is salty in taste and worm to the feeling. I have never used it in any other disease.

#### ASTERIAS RUBENS.

I have used this remedy in case of open cancer. It is also useful in mammary cancer when not ulcerated ; it is hard and painful. Dr. J. N. Majumdar recently had a case which is I believe is cured. He will, I hope, give you a short account of this case in the meeting. I also used it in uterine pains where Sepia is indicated but failed. I wish you would try this medicine in cases of cancer.

#### CALOTROPIS.

It is our ‘Akanda’ and known in this country as a remedy for Leprosy. I have its trial in some cases of leprosy without success. In open sores and syphilitic ulcers it is of great value. Dr. Gramm used it in anæmia of syphilitic patients with benefit.

## COMOCLADIA.

It is an analogue to Rhustox, so I use it in cases of rheumatism where Rhus fails. The indications are almost the same, *viz* the aggravation of pains by rest and amelioration by motion. It has one difference from Rhustox that heat aggravates and open air ameliorates. This is quite opposite of Rhustox.

I also use it in some cases of Eczema and in indolent ulcers in leg where Rhus. is indicated but failed.

## DOLICHOS.

I used Dolichos in skin diseases of various kinds where itching is intense and is aggravated by scratching. Dr. Clarke says that itching intensifies without eruptions but I have found it indicated even when eruption is present.

In a case of intense itching in a youngman with deep yellow eyes and constipated stools I used it with great relief to the patient. Sulph, Digitalis and Merc. failed me.

## GINSENG.

It is a chinese remedy but it is also found in America. I made use of it in cases of Appendicitis and I refer it to my book on Appendicitis. In a case of this disease my patient suffered greatly from intense pain in appendix, I gave Ginseng 6th three times a day. The pain was released in a day and he recovered.

I have also seen it used in cases of dysentery by late Dr. B. L. Bhaduri. Symptoms were great pain and tenesmus in rectum, lancinating pain ; stools thin with mucus and blood. It took long time to finish the evacuations.

#### GNAPHALIUM.

I have very often used this remedy in sciatica and rheumatic pains generally. Numbness and pain, especially on the left side and aggravation from cold and damp weather are its indications.

In my cases attacks are generally at night, cutting and stitching pains.

It has been administered in cases of diarrhœa and vomiting and also in dysmenorrhea but I have no experience with these.

#### GOSSYPIUM.

This medicine has a special affinity for female sexual organs. I have used it in amenorrhœa, dysmenorrhea and lack of usual lochial discharge after child birth. In one case the patient was about to get metritis from sudden stoppage of lochial discharge. I gave Gossypium 3x three times a day which brought on the lochial discharge and the patient got cured. In vomiting in pregnancy and copious flow of saliva it is a prominent remedy. Many recommend it in abortion.

#### HYDROCOTYLE.

I have used this remedy extensively for many years. My first instruction about it was gained from

Dr. Salzer in a case of ingrowing toenail when I called him in consultation. It is our own remedy called *Thankuri*. I made some tincture from it. Dr. Mohendra Lal Sircar advised me to give it in cases of Leprosy. In a case though not thoroughly cured I got much benefit from it. After the sores are healed the patient discontinued our treatment. Various skin diseases have been cured by it.

I derived great benefit from it in cases of elephantiasis of scrotum and leg. In an elderly person I gave hydrocotyle 6x internally and externally for a scrotal tumor the size of a large bail fruit. It was completely cured. I treated the patient for one year. It is a very important remedy and I hope you will give it a fair trial in suitable cases.

#### ODOFORMUM.

This is very extensively used as an external application by the allopathic doctors. I know of a case where Iodoform is applied in a sore for a long time, poisoning symptoms are developed. All the symptoms of meningitis are developed. I treated the case and still some chronic and occasional symptoms of the mind is seen. The youngman has now heat in the head; sensation ruling felt when any mental work has been undertaken; tired and bruised feeling in the whole body; biliousness and anorexia; the other violent brain symptoms are subsided.

In the discussion that followed Dr. Palit's lecture on Typhoid remedies in our last meeting, I remarked



that I made use of this in a few cases of drowsiness ; constipation, chewing motions of the mouth, contracted pupils and delirious talks of various kinds are its symptoms. I know nothing more about this drug.

#### LYCOPUS.

I have used it in cases of disease where Digitalis is indicated but failed. In our case of aneurism of aorta I gave it a trial but without any perceptible effect. It is useful in cases of Bright's Disease and hæmoptysis but I have very little effect.

#### MELILOTUS.

It is a very useful remedy and I make use of it in various cases. It is a good remedy for headache, bleeding from the nose, flushing, dysmenorrhea and insanity.

In one case of insanity an elderly gentleman much devoted to study and mental labor had gone mad. He had an idea that his son is surrounded by the Police, his house is searched and they take charge of his son. He is suspicious, thinks that all are contrived to give him poison, that they are coming to beat him. He is very much benefited by melilotus 6x three times a day.

In another case a youngman after hard study and brooding over his brother's conduct towards his father has gone out of mind. He complained of intense headache a few days before this disease. He is sometimes furious, tried to strike and bite, at other times

sane. He talked about religion and showed his reverence to Paramhansa Ram Krishna. He was thoroughly cured by melilotus 6x and 30. Fear of thieves and Gundas often troubled the patients. Headache of melilotus is of Belladonna type. Dr. H. C. Allen speaks very highly of this remedy in headache and even in various brain symptoms. In female diseases of various kinds dysmenorrhea and leucorrhea &c. it is useful.

#### NAPHTHALINIUM.

Naphthalin is used in coryza and cough. Fluent coryza and troublesome cough of Drosera type. I had very troublesome cough in a young child, especially at night and almost dry with some running from the nose. Arsenic did some good but teasing cough not gone. Naphthal 6x cured him.

I have cured a case of transmatic cataract by this medicine. A youngman got it from the injury to the eye (left) by a whip. It is said to be useful in cases of thread worm but I have no experience with it here.

#### ONOSMODIUM.

I make use of it in various kinds of headaches. Headache from overstudy, from sexual excess, pain in occiput, going down to the spine, very sensitive to touch.

I also used it in cases of menstrual headache. A young European lady suffered long from dysmenorrhea and consequent headache of occipital type aggravated

in the morning with dim vision. Menses Scanty and painful, onosmod 6x cured her.

In amblyopia and double visions it is of much use, In loss of memory and neurasthenia I use it with success.

P. C. M.

---

## TRADITIONS AND SUPERSTITIONS REGARDING HEALTH.

"How many people believe that gold wedding rings rubbed on the eye will cure styes? That green apples cause colic? That earrings improve sight? That a copper wire round the waist prevents rheumatism? That only nasty medicines cure? That whisky is good for pretty nearly any ailment? That the moon affects lunatics? That tuberculosis is hereditary? That measles are inevitable? That typhoid comes from dead weeds or fish in drinking water? That red flannel (must be *red*!) is good for sore throats? That sewer gas is poison? That small-pox can be telephoned from one person to another? That mosquitoes come from decomposing leaves? That malaria is due to night air? That robust people do not have small-pox? That scarlet fever scales are infectious? That raw beef steak is good for a black eye? That drinking cow's blood fresh and warm cures consumption? That the smell from a horse stable cures consumption? That if medicine is good for sick people, it must be still better for well ones?

That eating turnips makes one brave ? That onions cure or prevent small-pox ? That dead bodies necessarily breed a pestilence ? That rusty nails produce tetanus (lock-jaw ?) These and many more like myths make up the fragmentary creeds on health that we have inherited."—*Minnesota Public Health Association.*

Also how many people believe that the running matter of a calf's belly will prevent the zymotic disease curiously named "small-pox?" That the watery part of a diseased horse's blood will cure diphtheria ? That the germs of typhoid will cure typhoid ? That poison pushed to its "physiological effect" will cure disease ? That hydrophobia serum will prevent a disease not known ? That cerebro-spinal meningitis will cure ditto ? And so on, and on, and on ! Really when one comes to comparing the old superstitions of "the people" with those put out to-day by gentlemen who claim to be modern scientific physicians, one is apt ( if wise ) to take "the peoples" remedies—if *forced* to take either, which God forbid !—to those which our legislators often ignorantly force on us by their edicts.

According to reports Dr. Robert T. Morris, of the N. Y. Post-Graduate School of Medicine, announces ( at least the press says so but it sometimes errs ) that genius has been found by modern scientific medicine to be a disease, a pathological condition caused by "germs," which seem to be the gods of the moderns, the First Great Cause of everything.

According to all of this every man of genius ought to be in a sanitarium under care of the scientific physician, but as these gentlemen, Dr. Morris, for instance, are men of genius it follows that it would be one germ infected man leading, or as a crank might put it, the blind, leading the blind, both headed for the ditch. The new theory does not confine genius to literary men or those given to music, but proclaims that "genius" is a "germ," consequently if the mere pronouncement is correct, men of science cannot be exempt, and all of them ought to be quarantined. Perhaps the Rockefeller Institute may get up a serum to cure genius, for some say they are immune, though this may be a slander, for they may be as crazy as the rest of the world of genius, though this is doubtful.

In conclusion, when it comes to batting up superstitions we should be careful, especially the ultra-scientific, for they, poor chaps, think they are immune, whereas they have got 'em bad—a new crop every year.—*Homeopathic Envoy*.

---

### THE MODERN REDEMPTION.

All of the energetic preachers, like Mr. Sunday ; all of the ladies who want to protect the homes, mothers and children, and all good people everywhere, are after the drink habit to suppress it for the benefit of humanity, for its reformation, and its salvation. This is the prevailing idea, and, as we all know, it is

sweeping the country in a laudable desire to do that which the Church ( of all denominations ) is supposed, on the fundamentals of Christianity, to do, but, apparently, from the doctrines of the advocates of this movement, dose not do, hence, presumably, the new plan for the redemption of man. But Dr. Alexander Lambert, in the *Medical Record*, takes a different view of the matter which, in this day when scientific medical opinion has so much weight, ought to receive due consideration. Dr. Lambert is of the opinion that :

1st. That impulse to liquor is "an expression of the social impulse," and 2d, "It is a means to stimulate a belief that the waning youth can still be retained or it is the means with which the still further waning of the powers may be forgotten."

From this it would seem that the first incentive to the cup that cheers is superabundant youth, and the second, an effort to retard the passing of that halcyon period. But Doctor Lambert goes still deeper and points out the truth, to him at least, that the alcoholic wrecks "are really cases of chronic tobacco poisoning." Without going into his reasoning it may be stated that in his opinion the majority of the drunkenness to-day is due to tobacco, especially to cigarette smoking, though tobacco generally is not exempt.

Now, all this puts a new phase on the subject on which the world, from Russia to California, is in full cry to-day. If Doctor Lambert is right why, then, it follows that the world is chasing the wrong scent,

and so when they have run the quarry to cover will be no nearer the millennium than ever.

We hesitate to say what the Christian religion teaches on the subject of sin, but the fact that all denominations, in effect, teach that man must be regenerated, it seems to follow that there is something inherently wrong in man, else there would be no need of religion.

There is a parallel to these new ideas in what is known as modern medicine which teaches that all disease comes to man from without, that is to say from germs ; in other words, modern medicine is founded on the "germ theory," just as the modern ideas concerning the reformation of man are founded on excluding evil by excluding wine, tobacco and the like. Philosophically and fundamentally viewed there is a great gulf between the old ideas of saving humanity and the new ones that are being decided by a vote. The old comes with a "Thus saith the Lord," the new with Thus saith the majority vote. The old idea was that sin and disease must be cast out ; the modern idea is that they must be kept out—and there you are.—*Homoeopathic Envoy*.

### RHODIUM.\*

By DONALD MACFARLAN, B. S., M. D., PHILADELPHIA.

Rhodium is a metallic chemical element. It is found in association with the other elements of the

---

\* Bureau of Materia Medica. A. I. H., 1913.

platinum group and was discovered in crude platinum ore by W. H. Wollaston in 1803.

*Methods of Obtaining the Metal.* It may be obtained from the residues of platinum ore after treatment with aqua regia and removal of the platinum as chlorplatinite. The mother liquors are decomposed by treatment with metallic iron, the precipitate obtained being warmed with concentrated nitric acid and heated in an iron crucible with concentrated potash. The residue thus obtained is mixed with salt and heated in a current of chlorine, any iridium present being converted into its chloride by treatment with nitric acid and precipitated by ammonium chloride, whilst rhodium ammonium chloride goes into solution with its characteristic rose-red color. The metal itself is best obtained by the reduction of chloropurpureo rhodium chloride, in a current of hydrogen, the metal after reduction being cooled in a stream of carbon dioxide.

*Characteristics of Rhodium.* It somewhat resembles aluminum in color; its specific gravity varies from eleven to twelve and one-tenth; and its specific heat is 0.05527. It is less fusible than platinum. It oxidizes superficially when heated, and may be distilled in the electric furnace. It is insoluble in acids, but forms a soluble sulphate when fused with potassium bisulphate (a reaction which distinguishes it from the other metals of the platinum group). The atomic weight of rhodium has been determined by S. F. Jorgensen by the analysis of chloropur-



pureo rhodium chlorid, the mean value obtained being 103.

*Preparation in Use.* The preparation utilized in the provings was obtained from the firm of Ehrhart and Karl, homeopathic pharmacists of Chicago. The potency used by the writer was the 200th and was a hand potency of the remedy. Following is the method used by the firm in obtaining this preparation :

"Pure rhodium was triturated to the 6th decimal trituration, then converted into dilution. One grain of the sixth decimal trituration is dissolved in fifty minims of distilled water and mixed with fifty minims of alcohol. This gives the 4th potency. All following potencies are prepared with one minim of the preceding potency to 99 minims of alcohol.

"Very truly yours,

EHRHART AND KARL."

*Method of Use.* The remedy in all cases was given every hour. Both men and women were the provers. There were twelve provers in all. Many of them were rapidly affected, whilst one, a youthful nurse employed in the social service of the Children's Homeopathic Hospital, took the remedy for possibly ten days before she noticed symptoms. Only three of the cases knew they were making provings.

*Moral and mental Sphere.* Removed in the prover a shaky and nervous feeling. Later caused her on pushing the medicine to be "blue," nervous and tearful (1). A "run-away and cry" feeling helped in the prover (2). Dreams less than usual (8). In the case

of a young and healthy nurse, the remedy induced, after a long proving, an inability to go to sleep and on three nights successively she feels depressed—is worried over that about which she cannot explain. She is awakened at one time with a sensation as if her aunt was stepping on her chest—8. In a middle-aged man the sleeping has improved (due possibly to the improvement which rhodium exercised over the mouth-breathing and the bad cold of the prover)—12.

*Head.* Dull frontal headache—at time occipital—is seen—2. Helped a frontal headache, which was at times sharp and at times dull—3. At another time in the proving of this case a bad headache is seen, which is thumping and beating in character. There are shocks through the head. In another prover in less than a day, and taking the medicine every hour, it aggravated a moderate frontal headache to such a degree that it confined the woman to bed all day. On pushing still further it banished the condition next day around noon. When she was confined to her bed the pains were very sharp. This was seen in prover—5. In prover—6 there was a rapid induction of severe throbbing headache, with a misty eye condition. There was an associated pressive and oppressed head state, as is evidenced in beginning grippe. In prover—7 the medicine improved a frontal headache, which was dull and heavy over the eyes. In this case it was periodic in time. In prover—8 rhodium cleared a menstrual headache over the left eye. In another, headache from coughing improved—9. In (10) the

medicine produced a dizzy head. In (11) there were occasional fleeting neuralgic pains about the head, one place, then another, and these would come only at times. Neuralgic pain was seen in this case over the right eye, which was occasional. In prover—12 a dull headache, not constant, was apparent.

*Eyes.* Eyes a little blood-shot, a condition rapidly induced but not pushed in the proving. Eyes felt hazy, with associated mistiness of vision—6. In (8) twitching of lower lid of left eye (had this before, but medicine aggravated). In the same prover cleared a menstrual headache over the left eye. In (11) occasional fleeting neuralgic pains over eye (right).

*Ears.* In (11) occasional fleeting neuralgic pains in ear.

*Nose.* About the sixth day of the proving, taken every hour, produced on both sides of the nose a drawing pain—1. In this prover the pain at the nose area was like a boil drawing. In (3) the nose runs a clear mucus and blood (she has not picked her nose in any way). In (11) rhinorrhea all the time. Sneezed a lot ; also wanted to sneeze and could not, at times.

*Teeth.* In (11) occasional fleeting neuralgic pains in the teeth.

*Mouth.* Removed a bad breath in—1. A nasty taste in the mouth was helped in the same prover. Later, in this case the rhodium brought about vomiting and the vomitus was thick, slimy, and bitter. The medicine appeared to exercise in (8) a rather selective

action. She complained of thirst and a licking of the lips, because of a dryness of the same. She noticed also that her gums bled when she brushed them, most probably during the dental toilet.

*Taste and Gastric Symptoms.* The appetite is better since proving and progressively so—3. In (8) thirst was complained of. In (11) she has not been so hungry the last few days (this induced primarily in the prover). She did not care for her evening meal and later in the proving of this same nurse it removed her desire for lunch and her hunger for this meal has been dissipated. In (12) the medicine made him dyspeptic and stopped his digestion. Later on, however, it developed a sharper appetite on pushing the remedy. In (8) pickles and vinegar cause the teeth to go on edge. In (11) there was a feeling of nausea after eating—right after 5 o'clock supper and breakfast, too. Also nausea at 10 o'clock at night. Any sweet is nauseating (fled from the table, I believe, at the sight of dessert).

*Throat.* Cold worse (there is some doubt as to whether this was due to exposure). The cold has gone down in this same prover—3. In (12), the medicine, every hour, rapidly helped in the prover a bad cold. He used to sleep with his mouth open, but the medicine cured this bad "habit." The rhodium caused the hacking cough which he reported with to become loose. In (11) it produced a loose cold in the head.

*Chest.* Breast not sore, which it was before the medicine—9. In (12), the medicine every hour rapid-

ly helped in the prover a bad cold. He used to sleep with his mouth open and the rhodium cured this bad habit. The proving caused the hacking cough which he reported with to become loose. Later the cold was much better. This latter improvement noted and even remarked upon by his landlady.

*Back.* Aggravated in a short time a backache in—3. On pushing the remedy the condition not so bad. Attack of dull backache in the same prover. In (10) the prover can stoop much better; the difficulty in stooping removed by the proving a good bit, it appears. In the same person the left side had a catching pain.

*Neck.* Soreness from the nuchal region to the top of the head, which was throbbing with severe headache—6. In—8 the proving produced stiff neck and rheumatic pain down left shoulder and arm.

*Upper Extremities.* Rheumatism in the left arm (the pain a dull, cold ache) helped as the pain is not so bad in the arm—2. In (11) itching in both arms, palms of hand and face, as if the trouble was under the skin.

*Lower Extremities.* The pain in the left ankle (a dull ache) is made worse. It is more sore with the pain—3. In (10) improved the stooping trouble and also hip pain with it.

*Fever.* A little after the third day, every hour, could not get warm. Teeth even rattled with the chill—3. The remedy developed thirst in—8. In the same prover there was sweat about the head and

face, which was markedly developed at night. Constant licking of the lips because of a dryness of the same. Also seen in—8.

*Stomach.* Caused the appetite to be all right (before the remedy, he vomited everything)—4. Produced vomiting, sickness of the stomach, and gagging and retching in—1. In prover—5, the medicine every hour, removed a gagging, nauseated feeling in a woman probably three months in pregnancy. This occurred in the second day, when she even felt like eating. In prover—8 occasional nausea was produced. In (10), the rhodium improved a sickly stomach, and it caused, I believe, the prover to feel like eating, but of the latter half of statement am not absolutely positive. In (12) the medicine made him dyspeptic and stopped his digestion. Latter in (12) the appetite became better and sharper.

*Abdomen.* Dull pain in the abdomen all day long (1). Pain and sore in abdomen from coughing, which is paroxysmal, like whooping cough—3. Right-sided waist pain of a dull character in—4. In prover—6 there were gripings of the abdomen, as if she was going to have a large evacuation. In (8) griping in the belly and increased peristalsis was in evidence.

*Stool.* Constipation was induced in the prover, who is inclined to be free. This person ordinarily had motions twice daily. Later on, in this prover, laxity of the bowels was induced, and the bowels moved three times, and the motions were normal in both color and consistency. On the sixth day of this

same proving, the medicine every hour, the bowels were inactive all day long—I. In prover—4 before the medicine, the bowels were bound. The proving in this case helped the costive state. Prover—6 had normal bowel action to start with, and *loose stools were rapidly induced as a primary symptom of the action of rhodium. With this laxity, the medicine also brought on gripings in the abdomen.* In prover (7) rhodium relieved the costive state. In prover—8 the medicine had a very pronounced action. It primarily produced five motions *per diem*. This prover develops gas before the stool. The remedy also develops nausea before stool, due she thinks to a hyperactive peristalsis. This later condition, the hyperactive peristalsis, is a disturbing symptom. In this case, that of a highly intelligent nurse at the Children's Homœopathic Hospital, there is tenesmus after stool, as if the prover was under the influence of a material dosing by calomel. This is the language of the prover herself and it may convey to the mind of the reader the appreciable "spirit" of the proving, as it were. In (9) the bowels are not so bound in a costive old woman.

*Urinary and Sexual Organs. Passed more urine—a primary effect in prover—I.* Later on in the same case, on the fifth and sixth day of the proving, passed urine only twice each day. This of course bears out admirably Hahnemann's dictum of the primary and secondary effects of all medicaments. In prover—8 passing more urine, and about three times

the amount usually voided in her case. The same prover is passing her urine more frequently. Both these symptoms are primary. In this same prover the rhodium lessened the pain in her menstruation, but had no effect on the flow. The medicine cleared a menstrual headache over the left eye, also in (8). In prover—10 passing more urine—a primary symptom. In this case since taking the medicine urine is more yellow, before the proving a whitish sedimentation was apparent. In—11 delayed menses and produced a bad backache as well.

*Bronchial Symptoms.* Aggravated a scratchy cough and caused the same to be more frequent and tickling in the throat. Later in the proving, the cold is made worse—it has gone down and it hurts her to breathe. There is more cough and the cough is harder. The cough is scratchy and after she coughs she becomes wheezy, which soon starts her to cough again. The mucus from the chest is thick yellow—3. In prover—9 helped to remove promptly a distressing cough. The rhodium in this case made the cough looser.

*Cutaneous Symptoms.* On about the sixth day, every hour, made scalp all over sore to the touch—1. A fever blister produced on the upper lip in—8. In the same case the left side of the face is hot and red. In prover—11 itching in both arms, palms of hand and face, as if the trouble was under the skin. A purplish reddening of a vaccination scar also produced, the sight of which caused her annoyance at a dance, whilst in evening dress.



*General Symptoms.* Removed in the prover a shaky and nervous feeling—1. Feels weak and dizziness is complained of, when getting up from lying down—1. In (3) woman feels weak. In (8) a woman ordinarily somewhat feeble naturally, the remedy caused her to feel as if she were stimulated and could do more physical work. In same proving at another time felt drowsy. Thirst was developed in this prover. If my recollection serves me in—10 the rhodium caused the prover to be stronger. In prover (11) the general symptoms were interesting. I kept this young nurse on the remedy for a long time. She was in the habit of weighing herself periodically. She lost two pounds in ten days (she had been gaining or keeping the same weight before that). Primarily, in this girl, it induced a tired feeling. About the time she went off the proving, which was very long, she had noticed and her friends had evidently concurred because they mentioned it to her, a tendency not to worry over trifles, which she had done all her life. Little things worried her in an uncomfortable way and this was fortunately dissipated in the proving of rhodium on her. In prover—10, a tired and dragging feeling, not foreign to the prover, was helped. In prover—12 the man feels stronger. Previously he had described his vitality as low.

—*The Journal of the American Institute of  
Homeopathy.*

---

## JUVENILE DIABETES.

Diabetes in the course of the last decade has taken on a new aspect and the prognosis is no longer looked upon in such an unfavorable light. In this new aspect diabetes of the juvenile has shared and, while a strict carbohydrate-free diet in the adult type is now regarded as little short of criminal, the same standpoint is taken with even greater emphasis in the diabetes of infancy and childhood.

There are sound physiological as well as therapeutic reasons for this. Winters has shown that a growing child is always on the verge of an acidosis, due to the fact that in its normal metabolism so much of the basic mineral substance is required. It should also be remembered that the relative capacity for carbohydrate metabolism is much greater in children than in adults and progressively decreases as age advances. Again, as showing that the child proportionately needs a larger supply of sugar, the child is physiologically better equipped for carbohydrate digestion and assimilation than the adult, as the proportion of liver substance per unit of body weight is greater in the former.

In diabetes of infancy and childhood for other reasons than the intolerance for a carbohydrate-free diet the prognosis has hitherto been almost uniformly bad. Many of the cases of juvenile diabetes were not uncovered until the disease had advanced to a critical stage. Again, heredity plays a greater part in

the development of the juvenile type than it does in that of the adult, just as it does in gout and obesity, the two pathological conditions most nearly related to diabetes.

In a large correspondence with physicians, it has been our good fortune to hear of many interesting experiences in the treatment of diabetes in children with Trypsogen as the chief form of medication. Many of these reports have been favorable. They show that common sense dietetic measures based on physiological reasons and the administration of Trypsogen in dosage appropriate to the age of the patient, have not only reduced the usual symptoms to a minimum, but in many cases have cleared them up completely. That is to say, the patients have remained free from manifestations of diabetes for several years.

Pessimism should be relegated to the background in the treatment of juvenile diabetes, as with sensible dietetic treatment, involving no undue restriction of carbohydrates, and the exhibition of Trypsogen the physician has in his hands a powerful weapon in the treatment of the disease.

—*The Metabolist.*

---

# CONVULSIONS IN CHILDREN.

BY THEODORE A. WILLIS, B. S., M. D.,

Clear Lake, Iowa.

In presenting a paper on *convulsions* I realize that I am dealing not with a specific disease or pathological condition, but rather with a symptom of some such disease or condition ; a symptom, in fact, common to most of the diseases of infancy and childhood. At the same time it is a symptom of such importance and productive of such anxiety on the part of the observers as to deserve individual attention and to require symptomatic treatment during its occurrence.

Dorland defines a convulsion as "a violent involuntary contraction or series of contractions of the voluntary muscles." In order to have a convulsion, then, we must have voluntary muscles that are capable of contraction ; we must have intact nerve connections capable of transmitting impulses to the muscles ; we must have the impulse to be transmitted ; and finally we must have these functions occurring involuntarily.

When we consider the nervous system of the body we find that there are in the central nervous system "so-called nerve centers which serve as central exchanges between the afferent or sensory nerves and the efferent or motor nerves. Impulses are carried to these centers from every part of the periphery and from every organ

of the body by the sensory nerves and the closely interwoven sympathetic filaments. The nerve centers transform the impulses into motor impulses which the efferent nerves carry to the muscles inducing the muscle contractions. Normally these afferent impulses are occurring constantly. The occurrence of muscle activity, however, depends not alone on the existence of afferent impulses, but these impulses must be of such a character and strength as to win the approval of a certain controlling part of the cortical center which exerts an inhibitory action over the motor centers. It is for this reason that our bodies are not in a state of incessant muscular activity.

In order to produce a voluntary contraction of a muscle, then, we have an impulse coming from somewhere, transmitted to the nerve center by the afferent neurons and from there to the muscles over the efferent neurons. A convulsive contraction is simply an exaggeration of the voluntary, the nerve center discharging the impulse with excessive violence due either to an over-stimulation from the afferent neuron, to a hyper-excitability of the nerve center itself, or to under-inhibition by the controlling center. Moreover we find that in the infant and young child the nervous system is normally in a state of more or less exalted excitability, also that at this age the inhibitory center is in a rudimentary or undeveloped stage. Therefore we must expect an easy convulsibility at this age.

Diagrammatically we may represent the physiology

of a convulsion in this way : Let (N) represent the nerve center. Here we have the impulse (I) coming over the sensory nerve from *somewhere*. Here the controlling center (C), and here the motor neuron reaching to the muscles, (M).

Now let *somewhere be anywhere*. For instance an erupting tooth, an irritable stomach or a rectum full of worms, sending a constant succession of complaints to the nerve centers. The undeveloped inhibitory center of infancy loses its control and there are a series of motor impulses discharged with excessive violence, resulting in a series of violent involuntary contractions of the voluntary muscles.

Second, let (C) be the inhibitory part of a cortical nerve center, rendering the motor centers more stable and less liable to part with their energy. Now imagine an increased cerebral pressure due to a febrile hyperemia, hydrocephalus, or intra-cranial inflammatory condition. There is an interference with the inhibitory function of the center, and we find the normal afferent impulses resulting in convulsive responses.

Third, let (N) be a nerve center in an over-excitable condition due to defective nutrition, toxemic conditions, or to an organic disease, and once more we find the normal afferent impulses discharged with explosive force, especially so if the end plates and muscles are likewise in an irritable condition.

A convulsion is not apt to be mistaken for anything else, especially in the infant or young child,

where the art of malingering is inexpert. In the older patient the dilated pupils, the absence of the reflexes, the incoordinated movements and the history of the case are diagnostic.

The diagnosis is of little value, however, until we have ascertained the underlying or causative condition. Nor can we sooner institute more than an intelligent palliative treatment. We must know whether a convulsion is idiopathic or symptomatic ; a reflex irritation or an organic central lesion ; a toxemic eclampsia or an eclampsia of malnutrition.

Statistics tell us that convulsions in infancy are more apt to be idiopathic, due to cerebral pressure or to gastric or dental irritation ; in childhood meningitic, febrile or traumatic ; and later epileptic. Thus the age of the patient may be of aid in our search for the causative factor, as will a complete history of the case, in other words, the old reliable totality of symptoms which is the beginning and the end of all intelligent diagnosis and treatment.

For the safety of the patient, as well as for the peace of mind of the attendants, there must be prompt protection and palliation of the seizure, and while we are delving into the origin of the case we can do a great deal with this object in view. Thus a high temperature will often respond to hydro-therapeutic measures such as cool packs, sponges, and baths. A cerebral hyperemia can be reduced by immersion in a warm bath with cool applications to the head or by the use of various depressant drugs. Trousseau recom-

mends compression of one or both of the carotids opposite the thyroid cartilage in all cases of eclampsia until the attack is relieved. When the face becomes cyanotic the pressure is released, to be repeated in 15 to 30 minutes if necessary.

Many sources of reflex irritation may be immediately identified and relieved. I once brought to an abrupt termination a severe and rapid succession of convulsions by relieving a complaining stomach of a pint or more of plums—skins, stones, and all by the apomorphia route. The same agent has as quickly cleared up for me two cases of malingering. One a young man several "sheets in the wind" who had informed his lady love that her disdain had driven him to take poison ; and the other a school girl who was apt to have "fits" when disciplined. The latter I think is a permanent cure.

The greater number of convulsions must depend for their curative treatment entirely upon the intervals between attacks, and here we must use every effort and every available aid in getting at the very bottom of the case, for we can expect but little success until we do. If there is a toxemia we must hunt for its source rather than depend upon any system of gut scraping and kidney flushing for its palliation. If there is malnutrition we must know whether the fault lies in the food supply, the digestion, the absorption or the assimilation.

A number of the conditions responsible for convulsions are peculiar in that they are not apt to get



better "in spite of the treatment" as so many things do, and only through a thorough understanding of the case can we hope to restore the patient to perfect health, and until we acquire such an understanding we are doomed to failure and disappointment.

In summary I submit that a convulsion is really no more than a manifestation common to various disturbances. That it is more apt to occur in extreme youth, owing to the normally exalted nervous excitability and lack of inhibitory control at this age. And that though the severity of a seizure may require special alleviation, the intelligent curative treatment implies the discovery and intelligent treatment of the basic condition upon which the convulsion depends for its existence and which may be found under practically any subject in a complete and unexpurgated pathology.

—*The New England Medical Gazette.*

---

# THE INDIAN HOMEOPATHIC REVIEW.

A monthly journal of Homeopathy and  
collateral sciences.

The knowledge of disease, the knowledge of remedies and the  
knowledge of their employment constitute medicine.

—HAHNEMANN.

---

VOL. XXIV. ]

DECEMBER, 1915.

[ No. 12.

---

## HOMŒOPATHIC PRESCRIPTION.

Prescribing according to the homœopathic method is believed to be a very difficult matter and many think it to be almost an impossibility. It is indeed true to a certain extent, and to those who are totally unaccustomed to take the case properly and study *materia medica* diligently.

To take the case properly is Hahnemann's first instruction and he laid down fast and strict rules about it in his masterly work—the *Organon*. He very truly said that when a case is properly taken up, half the task of prescribing is attained. Totality of symptoms is the true guide to the selection of proper remedy to a case and that is the pivot upon which the cure of a patient is turned ; so if any physician wants to prescribe for a patient the exact homeopathic remedy, he

is to pay special attention to all the symptoms of the case in hand.

But now a days among the homeopathic practitioner this totality of symptoms is lost sight of and there are now two parties among homeopathic practitioners. One class depend solely upon pathological indication and the other upon a few special and peculiar symptoms of the case. This leads to fatal mistake in prescribing and finding out a curative medicine and so much to the deterioration of our cause. Hahnemann, no doubt, had said that special attention is to be given to peculiar and uncommon symptoms. This is true, they are our guides to the selection of a remedy but they are not all in all. They will take us a sure and easy path but proper medicine can not be found *only* upon these few symptoms ; here totality comes to our rescue.

I know this from my long personal experience of about forty years, in this homeopathic field, that many grievous errors have been committed by homeopathic practitioners in this country and abroad. Many failures may be accounted for by this one-sided way of prescribing. The prescriber should keep his eyes open to all sides and there and then only he can prescribe properly and gain the reputation of a good and successful homeopathic physician. Allopaths have palliatives in their practice and that is a redeeming feature with them. But in homeopathy we have nothing of that kind. We have either a curative medicine if properly selected or no medicine at all.

I will cite a few cases to show how this sort of mistake is attended with utter failure in effecting a cure which can be easily corrected if we pay attention to the totality of symptoms.

Sometime ago I was called in consultation to see a young lady suffering from glandular enlargement in the neck. She was otherwise healthy in every respects. A homeopathic physician of good repute was called. He at once concluded that the lady is scrofulous and prescribed all sorts of constitutional remedies without any effect. I took the history of the case and found she got a chill and sorethroat and that was apparently cured by allopathic gargles. The glandular swelling remained the same. It is somewhat hard and painful to pressure. She had slight fever in the evening. From all the symptoms taken together I suggested Rhustox as the proper remedy. But the attending doctor said it is not a deep acting and constitutional remedy. On my advise a few doses of Rhustox were given and complete cure was effected in a few days.

A strong looking elderly man had carbuncle in the back. I was called in consultation. All his symptoms point to Arsenicum as the remedy. But the doctor thought, it may lead on to septic poisoning, so he gave Lachesis as a preventive. Arsenic was given at last and a speedy cure was effected.

A few days ago I came in to see a young girl with fever, cough, pain and tenderness in abdomen, frequent scanty and painful urination and other symptoms. It

is a true picture of Apis, but the doctor objected by saying that apis has ameleoration by fanning but in this case the patient did not like fanning. However I gave her apis and a wonderful improvement is noticed in all respects. The doctor also said that this kind of case may go on to consumption so Tuberculine or some other anti-consumptive medicines should be given.

This sort of things is going on in homeopathic practice now-a-days and there is no wonder a total failure is the result. Repertory study is ignored and neglected by many, so fine shade of a medicinal action can not be obtained. We have already said peculiar, characteristic and pathological symptoms are very valuable but totality must be secured by all means. When a physician works upon this principle he is sure to get brilliant results from his prescription and this is the true secret of homeopathic prescribing.

Dr. Nash has truly said. "No physician would be justified in prescribing *Nux. vom.* on temperament alone, be the indication ever so clear. The whole case must come in."

P. C. M.

---

## BURNS AND SCALDS.

These accidents occur very frequently in every day life and its treatment is simple and efficacious in homeopathic practice. We have repeatedly verified the actions of our remedies in these affections both as

palliative and curative. If they are of slight occurrence the burning and after consequences are removed at once with a few doses of *Cantharis* 6x, or 30th. Symptoms of *Cantharides* as are found in our *materia medica* are the following :—Pains burning and sore ; Intense burning ; vesicular eruptions. Superficial ulceration caused by burns and scalds.

In the "Guiding Symptoms" of Hering the following occurs : "Recommended by Dr. Hering as a most valuable remedy in Scalds and burns. The injured part is immersed or bathed in a few drops of tincture in water. A potency may be given inwardly. To demonstrate the truth of *Similia*, he frequently challenged sceptics to burn their finger and then immersed the injured member in a dilution of *Cantharis*."

We have frequently seen the effect of *Cantharis* in mitigating the burning pains and preventing the formation of blebs when the medicine is applied to the injured parts then and there. Even external applications here are of greatest use. If it is of long standing occurrence we give the medicine internally in the 6th or the 30th potency.

In burns and Scalds, *Graphites* is a very valuable remedy in Scars and cicatrices which are prone to follow burns after destruction of tissues. Some oily substance should be applied without any medicine mixed.

Petroleum is another remedy of which Dr. Carleton speaks in the following terms : Petroleum rivals

Graphites, during granulation and cicatrization. Petroleum follows Cantharis well. Give the potency internally and apply locally the crude substance or its filtered product, vaseline. In the burns of first degree stramonium is one of our best helps. In the burns of serious nature, where the ulceration of duodinum seemed imminent stramonium is a great remedy. Urtica urens, when ulcers are formed, or in the first degree when the sensation is like nettle-rash. Application of honey we have seen mitigates the burning sensation at once and expedites cure. Honey is our apis malifica, so there is likely that this application cures homeopathically no doubt.

P. C. M.

---

### MATERIA MEDICA NOTES.

*Lobelia.* Vomiting of pregnancy, profuse salivation. Face bathed in cold perspiration. Chronic vomiting with good appetite, with nausea, profuse sweat and marked prostration. I have used it very frequently.

Asthma, constriction of middle of the chest, by exposure to cold or slightest exertion, going up and down stairs. It resembles Ipecac.

*Equisetum Hyemale.* Sense of distention in the bladder, severe dull pain, not ameliorated by urinating. Intolerable and frequent urging to urinate with severe pain at the close of urination. Depending on this symptom alone I cured the case of an old woman of chronic cystitis.

*Dulcamara.* I cured many cases of temporary swelling of hands, feet and other parts of the body, local swelling in cold weather. A young lady with severe itching eruption all over the body, after failure with allopathy &c. has been cured by Dulcamara 30.

Rash before the menses.

Urticaria over the whole body ; no fever ; itching burns after scratching.

Thick, brown-yellow crusts on scalp, face and forehead, temples, chin with reddish border.

*Sabadilla.* In Diphtheria and tonsillitis, can swallow worm food more easily. Depending upon this symptom I cured cases of these diseases easily. Throat symptoms go from left to right or vice versa. Here Lac. can. is also useful.

*Berberis Vulg.* Numbers of cases of bilious and renal colic have been cured by this remedy in my hands. Colic from gall stones. Stitching, cutting pains from left kidney following course of ureter into bladder and urethra. Bubbling sensation in kidney. This symptom I never found in my practice.

*Ammon Mur.* Menstruation symptom of this remedy is peculiar. Flow of menses only at night. Bovista has the same aggr at nights.

I have used it in a peculiar case of sciatica, failing with other remedies of similar kind. Pain is attended with contraction in the tendons. The patient is worse while sitting, some better when walking and entirely relieved on lying down.



I have cured a case of pains in the heels as if ulcerated. Failing here with *Phytolacca*, *Causticum* and *Ledum P.*

*Jalapa.* Child is screaming and restless at *night* from pain in abdomen and diarrhoea. Better all day.

P. C. M.

---

## THE SCHOOL CHILD IN ITS RELATION TO EUGENICS.

However much laws, looking to the improvement of the physical, moral and mental welfare of human beings are passed, public sentiment, as Dr. L. T. Royster (*Archives of Pediatrics*, Sept, 1915) points out, must be aroused as to their necessity and in order to back up the laws. Only through a general educational campaign can this be brought about.

It is hardly likely that a great deal can be accomplished in less than a generation, and by that time, those of us of the present generation will have passed out of the control of affairs and others will have taken our places. Our aim, therefore, must be to educate the generation which is coming on to take our places.

Our best opportunity lies manifestly in the school-room ; here we can implant the principle of eugenics when the mind is pliant and receptive, during the formative years of life, and so implant these principles that they will become just as inherent as honesty, patriotism, veneration and other desirable characteristics.

The child is taught history, political and militant,

and yet is kept in ignorance of the effects on nations of immorality and bad breeding. , He is taught patriotism through a respect for the flag, a regard for law and protection from an invading enemy, and yet that patriotism which means better citizenship, health conditions and all that makes for virile manhood is neglected. Is it not time that the instruction of the youth of our land was broadened, and is not the wonderful school system of the country the very opportune channel through which to work for the future improvement of the nation? Why should we neglect the most potent of all factors, the education of the children who are in a short generation to be the mothers and fathers, and in the seats of government?

Biology should be regarded as a fundamental just as much as the three "R's," for only through biology can be taught the laws of nature by which the race is propagated, the conception of cells and cell plasma, and that they are of two kinds—good and bad ; that through certain determinors and their development are character and health established ; through biology can the child best be taught sex relationship in a delicate manner and entirely within the bounds of propriety, and thus be fully prepared gradually for knowledge which comes to him more or less abruptly and from sources which are rarely wholesome but rather vulgar and suggestive.

The child at this age must also be impressed with the moral wrong done in bringing unfit offspring into the world. This should be taught as a fundamental

principle and in such a way as to be incorporated into the whole make-up of the individuals. The far reaching effects of the various diseases, not only directly on the individual, but also their effects when transmitted to the next generation, should be told in plain terms without reserve or prudery and yet without suggestiveness. The importance of personal hygiene should be so thoroughly taught that it becomes a habit to such an extent that no other than a hygienic life would be considered. The various forms of domestic science should form a very considerable part of the school curriculum, not only because of their importance in every-day life, but because right living in the home, which can be taught more effectively in school than elsewhere, is a potent factor in the problem of eugenics.

By far the most vital part of domestic science and the part at present most neglected, however, is the nursery. Most young girls enter into the marriage relation entirely unprepared in mind or body for what lies before them ; become mothers, the highest office in life, without having the faintest idea of the care of the infant, with the result that many of them learn the proper care of children at the expense of the life of at least their firstborn. Why should not the care of infants be incorporated into a course in domestic science ? The public school system should be the pioneer in such a movement and thus serve the cause of eugenics as it can be served in no other way.

---

*"Hygiene and the Child."*

## RECENT INVESTIGATIONS ON THE ADRENAL GLANDS.

Of perennial interest is the subject of the physiology of the adrenal glands, a subject which touches clinical medicine at many angles. In spite of the vast amount of knowledge which has accumulated regarding the relation of the adrenal glands to the other organs of internal secretion and to the body in general, the conception of the actual role of the adrenals is still veiled in obscurity. For this reason considerable importance must be attached to the researches undertaken by Crowe and Wislocki (*Bull. Johns Hopkins Hosp.*, Oct., 1914). They set out to determine the immediate and remote effects of a total removal of both adrenal bodies in young and old animals, and the effects of an adrenal insufficiency produced by the operative removal of portions of the gland at intervals of weeks or months.

It was found, first of all, in confirmation of the observations made by other workers, that in the dog the adrenals are vital organs, and that it is probably the cortex rather than the medullary portion which is essential to life. Total removal of both glands causes symptoms similar to those produced by a total hypophysectomy. When a part of one gland is excised the remaining portion undergoes hypertrophy, through the multiplication and enlargement of the cortical cells, chiefly in the fascicular zone. . . . Following an "almost total" removal of both glands there fre-

quently occur convulsions, a subnormal temperature, and other symptoms of acute adrenal insufficiency. From these manifestations the animal may completely recover. Adrenal insufficiency causes no permanent change in the carbohydrate tolerance, although a transient glycosuria always follows operative manipulation of either gland.

Of eminent significance are the experiments undertaken with the object of determining the relationship between the adrenals and the lymphatic system. Autopsies on animals that had had a long-standing adrenal insufficiency showed an enlargement of the mesenteric and retroperitoneal lymph glands and the solitary lymph follicles of the intestine. In many instances there was observed in addition a hyperplasia of the thymus. These findings are in close agreement with the observations that have been made for a long time in a cases of Addison's disease, in which a local or general hyperplasia of the lymphatic system has been noted. This close relationship has been shown in cases of status thymicolymphaticus which have come to autopsy, in which a marked hypoplasia of the chromaffin system has been observed.—Editorial, *Medical Record*, Oct. '35, 1914.

—“*The Metabolist*.”

---

## THE SCIENTIFIC METHOD OF DRUG PROVING.\*

BY RALPH R. MELLON, M. D., ANN ARBOR, MICH.

The subject matter of this paper assumes three things : that the old ways were good ways, but not of necessity the best ; that the law of similars was not a truth presented by God to Samuel Hahnemann, and incapable of further development; that progress is the law of life.

As I understand it, our homœopathic materia medica is made up of symptoms culled from several sources : first, from the proving of drugs on healthy persons ; second, from records of poisoning with these drugs, and third, reciprocally, by assuming that symptoms which disappeared during the course of the administration of a drug must, in susceptible individuals, have been produced by that drug.

Our materia medica was evolved during a period which precluded the possibility of obtaining reliable foundation for prescription from any other sources. Latterly, the advances in some of the important collateral branches of medicine have opened up avenues of approach to a drug's action not dreamed of in the earlier days. The development of physiology, bacte-

---

• \* Bureau of Clinical Research, A. I. H., 1915.

We have much pleasure in publishing this article with all the discussions, because we are also at variance with Dr. Mellon on many points. But our views have been nearly all expressed by our esteemed colleagues Drs. Dewey and others—Ed. I. H. R.

riology, organic and physical chemistry and immunity are the principal subject to which I refer.

Practically the old method of eliciting symptoms by the administration of drugs to healthy persons grows more difficult every day for several reasons. Homœopathic sentiment and conviction are not so strong as in the early days, and consequently, students are not desirous of becoming experimental animals. Guinea pigs cost from 50 to 75 cents per, and rabbits can be bought for twelve cents per lb., and in some mysterious way, students have become apprised of these facts.

Under the most favorable conditions, students will not permit the proving to be carried to a point where much really could be learned. At the first approach of symptoms, the drug picture becomes vastly modified by the emotional reaction. In control cases, I have noted some remarkable symptoms develop from the use of distilled water, while some who were really taking a drug evinced no disturbances when assured that they were taking nothing but distilled water. My experience is limited to students at the University of Michigan. They may have more convictions in other places, more devotion to homœopathy, and in such a case, the subjective symptoms would be of more value. In my proving of thymol some years ago, I had at least two men who convinced me that they really suffered serious inconvenience from that drug. Clinical verification of their findings by Dr. Bukk. Carleton of New York was gratifying; to say the least.

Notwithstanding the fact that this method is not so utilizable as formerly, it deserves priority when investigating a new substance. It is merely the method of going from the general to the particular and since the scope of the latter has expanded so greatly in past years, it behooves us to know at least what particular field of the drug's action we could investigate with the most profit. By the older method we could determine the spheres of activity of drug action, and minute investigation could be followed with the more detailed methods at our command. But in view of the fact that we have something over 400 drugs in our materia medica, the framework of which has been worked out by our predecessors. I believe that there is little use hunting new drugs unless one of the significance of radium appears.

There are enough drugs partially proven, and there are so many problems to be worked out regarding the administration of these that I believe we shall not suffer a great deal by discarding for the present the subjective method in drug investigation. The symptomatology of the drugs which we have is in need of revision, and what objective findings are incorporated in the provings, need expression in the terms of modern science.

For example : If a urine deposits a red sediment, we should know quite specifically what that sediment is. If there is an impoverishment of the blood, we should like to know the exact nature of it in accurate terms. If suppuration is produced, its grosser charac-



teristics should be expressed in terms of the exudate that the student's knowledge of pathology enables him to appreciate. A sticky exudate may be due to several constituents. The organisms producing such exudates can often be inferred from an accurate description of their character. And after we have proved that echinacea is a remedy *par excellence* in streptococcic infection, while hepar sulphur works better in staphylococcic, our formulation of such facts is more intelligible than to say that one drug works better in thin pus and another is indicated in the thick variety.

Medical terminology is vast enough without having a perfectly independent dictionary for our principal study. In case the subject matter overlaps, it is well that the terminology should be identical in proportion.

This is no reflection on the older way of doing things. The men of one hundred years ago did the best they could with the tools they had, and if we do the same with the tools we have, it will require more effort than has been put forth yet. No one casts any reflection on a horse and buggy as a means of travel, even though he may prefer an automobile.

As I have insinuated, the newer working tools of bacteriology and immunity make possible the application of methods of great promise in our particular lines. To be concrete, phosphorus is one of the drugs which we all prize in tuberculosis. The recent activity regarding lipoids and lipases and fatty metabolism gives wonderful opportunity for experimentation, with

this drug. No poison is more intimately connected with fatty change than phosphorus. It has been conclusively demonstrated of late that one of the principal means of reaction of the body to tuberculosis lies in its production of lipolytic ferments by the lymphocytes. The solution of the protective wax envelope of this again lays it open to destruction by the lymphocyte. Staining reactions of the lymphocytes bring out beautifully their ingestion of the waxy products. Most of the beneficial therapeutic agents against tuberculosis, including sunlight, fresh air, tuberculin, etc., are prominent stimulators of lymphocytic production. It would be an exceedingly interesting piece of information to know if phosphorus acted in this way. Wheeler of London claims to have shown that it increases the opsonic index to the tubercle bacillus. If the lymphocyte is the real agent acting against this organism, and as lymphocytes are not usually phagocytic, and since Wright's opsonic estimations regarding this organism so often conflict with the clinical course of the disease, it would seem of much more promise to work with phosphorus for the production of lipolytic activity.

The relation of phosphorus to the anemias is also interesting. Much work has been done recently with organic phosphorus in anemias with persons of a neurasthenic base. Russian experimenters have worked much with phytin, a form of plant phosphorus, in the successful treatment of such conditions. They have always recorded in detail the morphological and

hemoglobin changes, etc., in the blood. In their own language, they attribute the change to a pharmacodynamic action of the phosphorus. Lecithin has also been experimented with in this connection. It has long been known as an activator of ferments, and these changes have been shown to come about as the probable action of phosphorus on the nervous-system.

*Rhus toxicodendron* has long served as a prophylactic in rheumatism and last year I had the pleasure of meeting a layman, who for years has protected himself from *rhus* poisoning by chewing an occasional leaf of it. This procedure was made necessary by the fact that he had several fields in which the plant grew, and for years was subjected to attacks of poisoning, until he learned the secret of its prevention. I saw him eat a couple of leaves, which he did for my special edification. Since septic sore throat and rheumatism and the multitudinous sequelae of the streptococci have become apprehended, investigations of this drug might be exceedingly profitable in this connection.

And since the lymph-gland conditions, tonsillitis and the affections of the blood organs have become so prominent, the study of the baryta salts, *ceanothus* and kindred remedies would bear systematic investigation. If one could discover the relation of *baryta carbonica* to arteriosclerosis it would be definite light on one of the most distressing problems of our day.

There has already been work done by the other school with *rhus toxicodendron* regarding antibodies produced in the serum. The preliminary reports

appeared some time ago, but conclusions have not been definitely reached, so far as I know. The work done by Dr. Hooker of Boston regarding the production of complement fixation bodies with bryonia, baptisia, bichlorid of mercury and other drugs against the organisms of the typhoid-dysentery group is commendable, and very suggestive if it can be confirmed. The work of Dr. Burrett and others in this line is well known to you all.

The Abderhalden test, as well as other ferment work, opens up possibilities that are perfectly stupendous. Anaphylactic phenomena have unexpectedly thrown light on the various food and drug idiosyncrasies, and we can at least begin to resolve them in terms of things about which we know a little.

I don't know that there is need for further multiplication of examples. I have indicated in a general way how I think drugs should be worked out, and it is not necessary to produce grave symptoms to learn their therapeutic action.

Processes of immunity go behind the microchemical staining reactions of pathology, and their phenomena are too delicate to be recognized by these grosser methods. It is in this fact, more than any other, that I justify the use of these methods in studying drug effects. Homœopathic therapeutics has always been at war with pathology, because the latter recognized changes too far advanced for curative drug action. Immunity eliminates all that, and this should be the most potent factor we have in apprehending

drug action which formerly we have been pleased to call dynamic.

There is another aspect of this subject on which I should like to speak briefly, because it is so fundamental. One can scarcely think of this work without associating it with three things. These are adequate clinical facilities, endowed laboratories, and experienced workers. These laboratories should be connected with hospitals. The day has passed when we study dead pathology alone. We shall in the future study a living pathology, with, of course, a study of immunity.

We must have patients to work with as well as animals. The laboratory can be divorced in no sense from the bedside. Its findings for the most part are to be interpreted in the light of the clinical picture.

Unless we are willing seriously to go about obtaining ample endowment for our laboratory facilities for the use of hospitals, particularly in connection with the schools, but also with the isolated institutions, nothing can be more fatuous than to talk about drug proving. The entire matter becomes a travesty unless we apply scientific methods to its investigation. Any laboratory of the kind connected with a first class teaching institution should have a working endowment of at least \$ 250,000.

And, naturally, the men working in such an institution must have the aptitude and training for work of this kind. A man who devotes himself to this

work can seldom practice medicine and politics on the side, in addition to spending half of his time chasing a golf ball. And competent research men should receive something of an adequate compensation for their services. The opportunities in this line are getting plentiful enough, so that the only consideration under which efficient men can be obtained is by adequate remuneration.

Naturally, such organization must have logical division. No one man can be an expert pathologist, bacteriologist, and biological chemist all in one. That day, like many others, is past.

It is a discouraging thing to attempt to raise money for a project of this sort even among men with a rich clientele. Many of them are so persistent in asking one why he does not accomplish this, that and the other thing, that while one cannot censure them, he often questions just how serious they are. So, unless institutions can furnish the essentials in men and money to carry out work in drug proving that will be at least semi-intelligent, they can never be expected to be taken seriously, at least in this very important respect.

Vague ramblings and dreams, and ruminations about drug proving never accomplished anything, and although this aspect of my paper has been placed last, it must be practically the *alpha*. Otherwise all the papers we read and all the talk we do, and all the beating of the air about the law of similars will scarcely repay us for the energy we spend.

## DISCUSSION.

*Dr. Dewey, Ann Arbor, Mich:* Dr Mellon started in giving the variants of the materia medica for the last one hundred years and stated, very truly that the methods of Hahnemann of one hundred years ago and the methods of today are two different things. But all down through this hundred years there have been improvements. At the time Hahnemann first proved drugs, for instance, the stethoscope was unknown. Along about 1830 we read of provings of drugs in which we find in our symptomatology certain rules described as being coarse rules or fine rules or simple rules. Hahnemann knew nothing about that. There was an improvement from the time that Hahnemann first proved drugs to 1830. After another twenty years we find still other improvements in our proving methods, made necessary by the advent of new instrument of precision. Dr. Bellows, as you all know, some ten or twelve years ago issued a work known as the Model Proving of Belladonna; a fine work, but at the time Dr. Bellows issued that work bacteriology was not what it is today, nor urinalysis what it is today. Now as Dr. Mellon has said, the methods are improving and the methods of today will be improved in twenty years more and perhaps the disputants twenty years hence will look back at Dr. Mellon's paper and find out he was simply going along the line the same as the rest of them were. He speaks of the difficulties of drug proving. It is a serious question whether students of medicine make the best provers. The student of medicine who has to crowd into his curriculum of four years all the studies demanded today, is not, I believe, the best material for proving drugs.

Dr. Mellon speaks of giving water to some students and producing symptoms. That, of course, should be a part of the health record. If we find a student so imaginative,

better eliminate that prover, or at least hold his proving in abeyance until it has been verified by some other prover. Laboratory findings and psychology will have to be taken into consideration.

I believe there is another field in which we might do good work, and that is in proving the preservatives of our serums. You buy a bacterial serum or a vaccine. It comes in a sealed tube. You open the tube. What do you smell? Tricresol nearly every time, because many of those vaccines are preserved by tricresol. There is a fellow down in Cincinnati, another in Rome, Italy, who say the benefits of tetanin or the antitetanic serum are due to the tricresol in it. Whether that is so or not, it opens up a field of investigation.

The question of barium is being worked out. There has been a start made in the proving of loco weed, comparing it with the barium investigations issued by the United States Department of Agriculture. The proving of that drug is now going on. I have in my pocket a report which I received this morning from the Chairman of the American Institute of Drug Proving. There have been some provings made this last year, to be added to the nineteen provings of loco weed, which we already have, but which have not been published.

*Dr. Carmichael, Philadelphia :* As a teacher of materia medica I am delighted with Dr. Mellon's paper. The Homeopathic Materia Medica dependent as it is upon the treatment of individuals and not diseases, is based upon the determination of drug pathogenesis primarily upon healthy human beings. We cannot relegate this to guinea pigs or any of the lower animals. These are made use of to endeavor to obtain the ultimate pathogenesis of a drug which might correspond with the ultimate product of disease as found in the individual. In the past some valuable remedies have been discredited and condemned because their effects could



not be demonstrated upon the lower animals. In 1907 Hobat Hare of Philadelphia, editor of the *Therapeutic Gazette*, had an editorial upon the therapeutic value of cactus, in which he went into an elaborate statement and ended by saying that the drug was worthless because they could not produce the heart symptoms, ascribed to it, upon the lower animals. I wrote Dr. Hare a letter which he published the following month in which I took exception to his article, because the effects of cactus for which it is mainly valuable in heart disease, are largely functional and can be determined only on the human being who alone can give expression to such symptoms as the binding sensation around the heart, etc.

On the other hand we take such a remedy as bryonia and give it to healthy human beings until we have produced results down to the danger line (which is about the bifurcation of the bronchi). We can't go any further with our provers. We are justified then in taking animals whose normal morphology is similar, and we push the drug until we get hyperemia of the lung and fibrinous exudation. We are then justified in saying that this is part of the proving, or that bryonia is homœopathic to some cases of pneumonia. The animal experimentation has thus completed the picture of the causative effects of bryonia but it is only supplementary and cannot take the place of the provings on human beings.

To use the language of the preceding paper, morphologically our students have developed into such a state of mind that they require laboratory experimentation in their study of materia medica. It is doubtful that they will make better prescribers through such studies. Prescribing is an art and not a science. One who possesses extreme scientific knowledge may not make a better homœopathic prescriber than he who with less attainments in general science, knows how to

take the symptoms that were produced in a proving and apply them to a patient who comes along with a similar diseased condition. The same language may have expressed the drug pathogenesis that the patient now uses to convey the manifestations of his ailment. The physician is the artist who applies the appropriate remedy to the symptoms which are the expression of the disease in the patient. *You cannot prescribe scientifically for diseases as such. You may elaborate all the refinements of the laboratory and spend years in that kind of work but if you are going to preserve homœopathy you must prescribe for the symptoms of the individual patient and not for a supposed pathological entity named a disease. After all has been done, I don't believe that you will be able to do any more magnificent work than was done by the older homœopaths under the old nomenclature.* (Applause)

*The Chairman*, Science refined or unrefined deals with known elements only. As soon as a person begins to deal with unknown or unknowable elements he is not scientific, he is theoretic, and many a laboratory worker is nothing but an ingrained theorist.

*Dr. Rice, San Francisco* : I am sorry I have to take issue with Dr. Mellon in his conception of what constitutes a scientific drug proving. Far be it from me to belittle the achievements of the modern laboratory, the real achievements ; but I have a strong belief that much of what the laboratory has done has not been for the best interests of our science. The mode of the experiments, the results which are obtained, all tend strongly to a materialistic conception of disease and to the employment of materialistic therapeutic agencies. This is in direct variance with Hahnemann's conceptions of both disease and the curative properties of drugs. He taught that both were dynamic. And right here may possibly lie the cause of the lack of interest so many of our

students, and physicians too, have in the strict homœopathic method. The laboratory idea being the dominant idea, and the dynamic theory, incompatible as well as unpopular it falls by the wayside and is forgotten. The age-old quarrel between the pathologist and the so-called symptomatologist has not been on the ground of the latter's disdain of pathology, but rather that he refused to recognize the claim of the former that pathology supplies a rational basis for a prescription. The modern laboratory worker's methods undoubtedly lead us to base our therapeutic system upon the generic facts of disease and upon material and gross changes in tissue. This causes us to overlook, if not actually to deny the importance of the finer facts of purely dynamic changes, and those that belong strictly to the individual. A drug proving made on the basis outlined by Dr. Mellon cannot possibly reveal to us all that should be known of its action.

And this leads me to take issue also with my esteemed friend, Dr. Krauss, when he says that a scientific proving consists in finding out all that is knowable of the effects of a drug. It is surprising to hear this modern Aristotle talk about settling a matter scientifically and ignoring the element of cause, considering only effects.

Some months ago I made a proving of *rhamus Californicus* on six medical students. Two developed head and mental symptoms only; two cardiac symptoms and two urinary and sexual symptoms. Now why this difference in reaction. Does anyone mean to say that by simply gathering up these effects we can have a scientific proving? Can anyone possibly go so far astray from ordinary scientific methods as to say that the conditions causing these variations in reaction are immaterial in the consideration?

But to return to a discussion of the laboratory drug provings: "Have" it ever occurred to you how valueless are those

symptoms which are discovered with the aid of the ophthalmoscope, the microscope, the test tube, and what not, to the man who does not know how to use these instruments or who has no up-to-date laboratory equipment? And does it not follow that the more symptoms discovered in this way, that we put into the record, the more cumbersome we make the *Materia Medica*? Of what value is that symptom in the record which I observed with the ophthalmoscope to ninety-nine out of every one hundred physicians who do not know how to use the instrument? But granting that we can all know how to employ scientific laboratory methods, what do we gain if we ignore that which lies behind effects we observe? I cannot too strongly insist upon the importance of the study of organization in our problem of drug proving and of *materia medica*. Until we have a knowledge of the character of the organization of a prover we can have none concerning the reactions which take place. When we do have this knowledge then shall we be able to transfer this matter of prescribing from the realm of art over into the realm of science where it really belongs.

*The Chairman.* I believe that when all the knowable effects of a drug will have been found there will be nothing else to be found, but I think it is due to Dr. Rice to say that he has put his finger upon the defect of the Bellows' proving. The failure of the Bellows' proving lies in the insistence upon the objective phenomena of the drug rather than upon the subjective phenomena and the failure of it is here, that objective phenomena are conducive to diagnostic purposes rather than to therapeutic purposes and subjective phenomena are more conducive to therapeutic purposes than diagnostic purposes for this simple reason, that the subjective phenomena is the expression of the whole, the objective phenomena is the expression of only a part, a locality of that man.

*Dr. Hooker* : Relative to the statement made by Dr. Rice concerning the use of modern instruments of precision which are of no use to the general practitioner, is that the fault of the laboratory man ?

*Dr. Rice* : To be sure it is not the fault of the laboratory man ; but it is obviously impossible for all to be expert laboratory men. And granting that what is discovered in the laboratory is in strict keeping with science, the fact remains, that as a great majority of us are very ignorant of laboratory ways, these discoveries have little or no value for us. A stronger argument against the domination of the modern laboratory, however, lies in the fact that here only effects—results—are studied ; and since these may or may not throw any light whatever upon morbid processes the methods are of doubtful value. Especially is this true when applied to the study of materia medica, or its development, since we have demonstrated the fact a thousand times that character of organization modifies character of the effects. This, it seems to me, makes the study of human morphology absolutely necessary in order to grasp the full meaning of the facts revealed to us by the modern laboratory methods.

*Dr. Nesbit, Bryn Mawr, Penna* : Dr. Mellon is to be congratulated upon his paper. Its intrinsic merit reflects thought and work combined. In a friendly way, he has also “started something” in discussion of a technical principle of fundamental significance. In every scientific procedure there are two technical elements involved, principle and procedure. We must not lose sight of either.

I heartily agree with Dr. Mellon in the emphasis he puts upon the practical importance of studying the experimental effects of drugs along lines parallel to those upon which we pursue our studies into the natural history of disease. If we do not thus parallel these two lines of investigation, the two

groups of experimental data are incomparable and more or less unintelligible to men and women who are taught medicine by modern clinical and laboratory methods. This point was emphasized and illustrated by the speaker in a paper read before the German Medical Society of Philadelphia, entitled "Similia Similibus Curentur. The Comparative Method of Studying the Action of Drugs. An Illustrated Study." It was a fragmentary study of the similarity of pathogenic effects between arteriosclerosis of the Moenkeberg type and barium chlorid. It was published in the Hahnemannian Monthly for November, 1910.

From this same standpoint of practical importance, I take friendly issue with Dr. Mellon as to the relative significance of subjective symptomatology. With the introduction of laboratory methods into our later drug studies, there is a disposition to minimize the importance of subjective symptoms which the practical considerations of the case do not warrant. The practical difficulties encountered in attempting to establish the trustworthiness of subjective phenomena do not relieve us of the responsibility for checking up the mere say-so of the prover by a scientific technic. It is quite true, as Dr Mellon has suggested, that the mental attitude of a prover when taking a drug experimentally may determine largely his productiveness of symptoms. The same may be said as to his functional activity as evidenced by such objective signs as food and liquid consumption and excretion, nervous reflexes, etc. I have found, by actual experience, that one of the most "productive" men in a series of provings extending over a period of thirty consecutive days was a "control" subject, who had not received a single drop of the drug at any time. The technical difficulty of controlling these subjective phenomena does not permit us to disregard them. On the other hand, the laboratory technician may not

have too much confidence in his objective phenomena ascertained by instruments of mechanical precision, if he will constantly bear in mind that this very precision is but relative. Even in our very exact blood work there is a considerable element of error due to 'technic. With dead animal tissue especially there is so much allowance to be made for the artificial conditions under which the cells are examined, that we need fear constantly lest some clever mechanic may invent a farther seeing instrument over<sup>o</sup>night, which will completely overthrow the hypothetical superstructure we have painfully erected upon our more limited vision of the ultimate (?) cell. Practically, we are forced to depend very largely upon our observations of functional activity, rather than tissue changes. This functional activity is no 'less subjective than objective in any subject of experiment. Certainly, we may not ignore the subjective phenomena in the human subject, be that subject under conditions of experimental or natural disease. The trend of modern medicine is to emphasize the importance of the subjective phenomena of diseases, and to analyze them by scientific psychological procedure. We can hardly afford to be less scrupulous in our experimental drug pathogenesis.

There appears to me to be some confusion here again in the use of the terms "art" and "science." The study of drug pathogenesis may quite possibly be considered a science. But, applied therapeutics continues to be an art for the simple reason that under no circumstances *can* the conditions of the application in two instances be identical. In every application of pathogenesis to disease we have at least two personal equations—two irreducible factors—to deal with, the patient and the physician. We may investigate the effects of drugs or of diseases scientifically; and we may discuss the science of a disease's natural course; but in the application of one

group of facts to the other we are necessarily limited to the conditions of a scientific art, or an applied science only. The practical distinctiveness of each natural or drug disease makes it imperative, that we substantiate the subjective phenomena, rather than ignore them.

*Dr. Mitchell, Chicago :* Dr. Mellon has outlined the scientific method of drug proving. He is not required to say anything about prescribing or about the art of medicine. I commend Dr Mellon's paper because I believe in the perpetuation of homœopathy and I believe that it is through just such young men as he is that we are going to dignify homœopathy and perpetuate it. The scientific method simply means something definite. In the laboratory the various clinical instruments of precision are devised for the purpose of telling you something that is definite. I am not satisfied to take up a book on homœopathy and read the bald, indefinite statement that such and such a drug produces "cloudy urine." How do I know what cloudy urine means? I have been examining urine for thirty years and can't tell you now what cloudy urine means unless I examine this urine, and I want to know whether a drug produces a disturbance of function, or whether it causes real pathology.

*Dr. Aurand, Chicago :* We must study drugs from the pathological standpoint, the affinity of the drug for the individual and the dynamic force of the drug.

*Dr. Hooker, Boston :* A large part of this discussion has focussed on the question whether subjective or objective symptoms are of more value in diagnosis and in prescribing. Subjective symptoms have formerly been favored because among them have been found certain "rare and peculiar" symptoms which have been taken as representative of the individuality of the patient. Objective phenomena have fallen into disfavor because they have seemed to be largely those



symptoms which are supposedly common to many conditions, hence of little value in prescribing. May I suggest that this may be due to lack of study in differentiating objective symptoms both of drug and disease origin; that this in turn has been due to lack of delicate methods of precision, which now are being brought to a comparatively high grade of efficiency with the progress of biochemistry and immunology.

We certainly ought to know everything possible about drugs. In studying drugs why not use modern methods of approach which are so remarkable as indicators of specificity, especially when we are trying to establish the specific relation of drugs to disease? Why take the attitude that subjective symptoms *must* be pre-eminently the future basis of drug study and prescription, when the diagnostic and therapeutic possibilities of specific, almost pathognomonic, objective phenomena are just unfolding? The whole question is one of practicability. The task in the subjective sphere is rendered difficult because subjective phenomena are so largely under the control of the prover, and subjective symptoms are so frequently manifested in suggestible control provers. Serologic and tissue changes, on the other hand, are not under such mental government, so they could not so frequently be rendered invalid by that factor.

—*The Journal of the American Institute of Homeopathy.*

---









